

DOCUMENT RESUME

ED 352 479

CE 062 616

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TITLE Reaching Families and Youth Who Have Limited Resources. Proceedings of a Conference for Educators and Practitioners in Family, Youth and Community Development (Columbus, Ohio, September 16-17, 1992).
PUB DATE Sep 92
NOTE 59p.
PUB TYPE Collected Works - Conference Proceedings (021)
EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Adolescents; Adult Basic Education; Alcoholism; Career Development; Career Education; *Community Development; *Disadvantaged; Disadvantaged Environment; Disadvantaged Youth; Drug Addiction; Education Work Relationship; Extension Education; Family Characteristics; *Family Problems; *Family Programs; Family Relationship; Homeless People; *Low Income; *Parent Education; Poverty; Program Development; Program Implementation; Student Organizations; Volunteers; Youth Problems

ABSTRACT

These conference proceedings contain abstracts of papers or complete papers that were submitted for presentation, along with descriptions of all workshops from a conference on reaching families and youths who have limited resources. The following are included: "Volunteerism and Limited Resource Audiences" (Safrit, Smith); "Cultural Do's and Don'ts" (Frazier); "Urban Families--Can You Help?" (Langenhop); "Understanding Appalachian Culture" (Maloney); "Home Safety Issues Facing Families Who Have Limited Resources" (Martin); "Understanding Family Violence" (Carbonell); "The Answers to Evaluating Programs for Limited Resource Audiences" (Spiegel); "The Plight of Homeless Families" (Sterling); "Marketing Principles for Non-Profit Organizations Working with Limited Resource Audiences" (Gibbons, Carroll); "Managing Limited Human and Financial Resources" (McKinney et al.); "Neighborhood Family Center" (McLellan, Curlee); "Health Care with Limited Resources" (Anthony, Weber, Birkhoff); "Parenting Young Children: For the Professional Working with Families Who Have Limited Resources" (Arkin); "Volunteerism with a Family Focus" (Smith, Safrit); "Relieving the Stress of Single Parent Families" (Brush, Love); "Understanding Literacy" (Adams, Fischer); "Building Coalitions to Reach Audiences Who Have Limited Resources" (Clark); "Let's Talk Sense about Sex" (Kelbaugh); "Career Quest--Helping Youth Move into Their Future" (Siek); "Is There a Link between Diet and Behavior?" (Saddam); "Know Your Neighbor" (Yuen); "4-H Juvenile Diversion...Sentencing Youth to 4-H" (Shockey, Hyman); "Strategies in Working with Chemically Dependent Adolescents and Their Families" (Woeller); "Marketing Programs to Youth Who Have Limited Resources" (Gibbons, Carroll); "What's My Line?--Developing Self-Esteem among Youth Who Have Limited Resources" (Cripe); and "Meeting the Challenges of Youth Who Are Homeless" (Brown). (KC)

ED352479

REACHING FAMILIES AND YOUTH WHO HAVE LIMITED RESOURCES

A Conference for Educators and Practitioners in
Family, Youth and Community Development

CONFERENCE PROCEEDINGS



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September 16-17, 1992
Columbus, Ohio

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September 16, 1992

Dear Conference Participant:

In keeping with our theme of "Reaching", this diskette is "reaching out" into the technology of the 90's. We asked workshop presenters to submit abstracts of their presentations. Those abstracts we received are on this diskette, along with descriptions of all conference workshops and the names, addresses and phone numbers of presenters.

We hope you find this useful in your personal and professional efforts. Enjoy!

Sincerely,

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TABLE OF CONTENTS

PAGE

FOCUS ON AUDIENCES WHO HAVE LIMITED RESOURCES

Volunteerism And Limited Resource Audiences, Safrin R.D.;	
Smith, W.	1
Cultural Do's And Don'ts, Frazier, F.	7
Urban Families - Can You Help?, Langenhop, M.L.	7
Understanding Appalachian Culture, Maloney, M.	8
Home Safety Issues Facing Families Who Have Limited Resources,	
Martin, R.	9
Understanding Family Violence, Carbonell, J.A.	12
The Answers To Evaluating Programs For Limited Resource Audiences,	
Spiegel, M.R.	13
The Plight Of Homeless Families, Sterling, D.	15
Marketing Principles For Non-Profit Organizations Working	
With Limited Resource Audiences, Gibbons, G.;	
Carroll, P.	15

FOCUS ON FAMILIES

Managing Limited Human And Financial Resources, Spiegel, M.R.;	
McKinney, C.; Wessell, J.; Smith, C.; LaMuth J.; Chirayath, B.W.;	
Seiling, S.B.	16
Neighborhood Family Center, McLellan, N.; Curlee, D.L.	20
Health Care With Limited Resources, Anthony, C.M.; Weber, B.;	
Birkhoff, J.	23
Parenting Young Children: For The Professional Working With	
Families Who Have Limited Resources, Arkin, C.F.	30
Volunteerism With A Family Focus, Smith, W.; Safrin, R.D.	30
Relieving The Stress Of Single Parent Families, Brush, Sally;	
Love, R.L.	35
Understanding Literacy, Adams, L.A.; Fischer, C.T.	37
Building Coalitions To Reach Audiences Who Have Limited	
Resources, Clark, R.	39

FOCUS ON YOUTH

Let's Talk Sense About Sex, Kelbaugh, B.	40
Career Quest-Helping Youth Move Into Their Future, Siek, G.	43
Is There A Link Between Diet And Behavior?, Saddam, A.M.	43
Know Your Neighbor, Yuen, G.W.	43
4-H Juvenile Diversion...Sentencing Youth To 4-H, Shockey, S.S.; Hyman, H.E.	44
Strategies In Working With Chemically Dependent Adolescents And Their Families, Woeller, B.S.	48
Marketing Programs To Youth Who Have Limited Resources, Gibbons, G.; Carroll, P.	48
What's My Line? - Developing Self-Esteem Among Youth Who Have Limited Resources, Cripe, R.	49
Meeting The Challenges Of Youth Who Are Homeless, Brown, N.	50

AUTHOR INDEX	51
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FOCUS ON AUDIENCES WHO HAVE LIMITED RESOURCES

VOLUNTEERISM AND LIMITED RESOURCE AUDIENCES

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Key Words: limited resources, volunteers, volunteerism, management

THE CONCEPTS OF VOLUNTEER AND VOLUNTEERISM

Volunteers and volunteerism are highly prevalent concepts in today's society. In 1989, over ninety-eight million people aged 18 or older volunteered services worth more than \$170 billion dollars (Independent Sector, 1990). This represents over half (54%) of the American adult population. Volunteers contributed an average of 4.0 hours per week, down from an average of 4.7 hours in 1987. The amount of volunteer time totaled 20.5 billion hours, which represents a 10% increase from the 19.5 billion hours contributed in 1987. Married people volunteered more than single people, females volunteered slightly more than males, and volunteering by minorities increased. The fastest growing pool of volunteer resources came from the private sector, and volunteer opportunities were more diverse than ever before.

Although the concepts of "volunteer" and "volunteerism" are extremely familiar to most individuals, they are not defined consistently. Smith (1982) conceptualizes volunteers as individuals who donate their time to help other people directly, particularly in areas of health, welfare, housing, education, recreation, and rehabilitation. Park (1983, p. 118) suggests that "the heart of volunteerism is the countless individual acts of commitment encompassing an endless variety of...tasks". Although functional definitions of volunteerism are as varied and contrasting as the volunteers themselves, a unifying concept is the idea that volunteers are not paid for their services. In the Volunteer 2000 Study conducted by the American Red Cross, Smith (1989) defines volunteers as individuals who reach out beyond the confines of their paid employment and of their normal responsibilities to contribute time and service to a not-for-profit cause in the belief that their activity is beneficial to others as well as satisfying to themselves. However, Brudney (1990, p. 3) notes that some organizations "allow that [volunteers] may receive partial subsistence remuneration and/or reimbursement for out-of-pocket expenses".

The Extension Service, United States Department of Agriculture (1990) defines a 4-H volunteer as any person, adult or teen, in a leadership capacity who contributes time to the promotion, organization, assistance, or leadership of a 4-H organization, and is not paid for services

rendered. The Ohio 4-H youth development program of The Ohio State University Extension defines a 4-H volunteer as: Anyone who (1) contributes time, energies, or talents to the Ohio 4-H program and (2) is not paid by The Ohio State University Extension funds. This definition emphasizes an active involvement and partnership between Ohio 4-H and individuals identified as volunteers. In perspective, those individuals who contribute financial and/or material resources to Ohio 4-H are recognized as donors or sponsors. Volunteers, donors, and sponsors are all important partners with Extension professionals and are vital to the continued success of the Ohio 4-H program.

HOW VOLUNTEERS AND AN ORGANIZATION BENEFIT EACH OTHER

Volunteers are very effective teachers of other volunteers. Drennan (1980, p. 110) suggests that "carefully trained volunteer...teachers are as productive as professional instructors". Finley (1987) identifies several advantages to having volunteers teach in communities. Volunteer teachers: (1) are most often individuals who talk the same language and share similar life experiences as their learners; (2) speak with an authority that derives from their experience with utilizing the ideas they teach; (3) are usually respected within their communities, and their recommendations carry weight with learners; (4) are perceived to be more easily accessible than professional educators; (5) volunteer to teach subject matter in which they are highly interested and, consequently, teach with enthusiasm; (6) are easier for some learners to relate to than professionals; and (7) inspire confidence and self esteem in their learners.

The educational partnership between an organization and volunteers has enormous value not only to the organization and its clientele, but also to the individual volunteer and the community at large (Finley, 1987). Volunteers benefit an organization in that they extend the educational outreach of the organization to a greater number of youth, parents, and other volunteers. Volunteers generate enthusiasm and interest among learners and create a positive image for an organization by allowing it to provide immediate information to learners about specific topics. Volunteers relieve professionals of many time-consuming individual requests for specific information, thus allowing the professionals to pursue other organizational needs and objectives. Volunteers enable organizations to cover more subjects to a greater depth and with more continuity.

Organizational members, clientele, and other volunteers benefit from volunteers in that more individuals are able to receive immediate information regarding a specific subject. A greater number of learners are able to develop skills and expertise regarding a particular subject matter area and to employ new ideas and skills because of information received from volunteers. Finally, volunteers enable more learners to achieve satisfaction and pride from their educational endeavors that are shaped by the learner's interactions with volunteers.

The individual volunteer benefits by having the opportunity to pursue an interest and consequently gain new information, develop new skills, or enhance existing knowledge. Volunteers develop leadership and social skills as they interact with learners and other volunteers. They develop personal pride and self-satisfaction as they help learners, and gain status and satisfaction from becoming recognized experts in a specific subject. Volunteers continue to develop their knowledge of a subject matter area, often gaining considerable expertise from the experience of actually teaching the subject matter to others (for some, the

teaching experience is like attending college and majoring in a subject). Dale's (1954) "Cone of Experience" suggests the importance of active participation by a learner in the retention and assimilation of new knowledge (Figure 1). The wide apex of the cone represents the greatest amount of learning that is achieved when the learner actually does something in the teaching-learning process. Consequently, when a volunteer shares their skills and knowledge with a learner, the learning experience is intensified for both volunteer and learner alike, and more new knowledge is retained and internalized.

Finally, communities benefit from the contributions of volunteers in that the information provided by volunteers helps individuals and their families improve their homes, businesses, and neighborhoods. Greater enthusiasm and rapport develop within communities when volunteers share their enthusiasm for new information and practices, thus encouraging others to become interested in a subject. Furthermore, local sources of knowledge and recognition of outstanding volunteers can contribute to overall community pride.

GENERAL ROLES FOR VOLUNTEERS

Volunteers work with professionals in fulfilling several general yet important roles in managing family and youth development programs. These include: (1) teaching and sharing information with youth and their families, (2) teaching and sharing information with other volunteers, (3) providing logistical support (e.g., organizing events and activities, conducting meetings, providing transportation, etc.), (4) providing clerical support (e.g., writing newsletters, answering telephones, answering questions and requests for information, etc.), (5) developing new resources (i.e., identifying and cultivating potential sponsors and donors), (6) allocating existing resources (i.e., administering budgets, recommending spending priorities, etc.), (7) assisting with administrative responsibilities (e.g., completing reports, making promotional presentations, etc.), (8) developing programs (e.g., identifying needs, establishing objectives, identifying strategies, securing resources, conducting evaluations, and reporting results), and (9) assisting with futuring and strategic planning (i.e., identifying future needs, recognizing emerging trends, establishing long-range goals, etc.).

In examining these general roles, the important word to remember is partnerships. In many youth organizations, a "top-down" philosophy is followed in which professionals at the "top" of the organizational pyramid are perceived to "control" the functions of middle managers and other volunteers who, in turn, "control" the activities of youth and their parents.

However, organizations with successful volunteer programs emphasize a "bottom-up" philosophy which places youth and their parents in a position of foremost importance in the organization. Professionals function to "uplift" and support middle managers and other volunteers as they, in turn, support young people and their parents with educational programs. Indeed, professionals and volunteers must develop strong partnerships, based upon mutual respect and trust, if an organization is to be successful in reaching its goals.

BASIC COMPONENTS OF EFFECTIVE VOLUNTEER DEVELOPMENT PROGRAMS

There are certain components that are basic to the effective and efficient operations of any non-formal educational program (Boone, 1985), including volunteer development programs, whether it be in 4-H youth development, the public schools, a community hospital, etc. First, volunteer needs must be identified. A professional administrator or middle manager must recognize and understand the needs of individual volunteers and identifiable volunteer groups related to both the volunteer's personal development and their responsibilities in the program. Such identified needs are the basis for establishing common goals of the volunteer development program. Based upon the needs identified and goals established, a volunteer administrator or middle manager must plan appropriate volunteer educational and training opportunities to address the needs and goals. Effective planning is best accomplished in cooperation with the individuals and groups affected, including the volunteers themselves.

Resource procurement, including both material and human resources, is necessary to accomplish what has been planned. Volunteers are excellent sources for identifying and securing needed resources. Such volunteer involvement is a natural progression of their involvement from the very beginning in identifying needs, establishing goals, and developing plans. Additionally, adequate staffing of volunteer development programs is more easily accomplished as a result of direct volunteer involvement in resource procurement.

Implementation is the component of volunteer development programs that most often excites and energizes professional and volunteer staff alike. Too often, however, implementation is initiated without adequate forethought and preparation. In other words, needs identification, goal setting, and resource procurement must precede this component to insure that the implementation strategies are realistic and appropriate for the volunteers affected.

Program evaluation and renewal/continuity are closely related concepts. Without an appropriate evaluation plan, the professional volunteer administrator and/or middle manager cannot effectively determine if the identified needs have been met and the established goals reached. However, evaluation is not an end in itself, but rather a resource to utilize in providing for renewal and continuity in volunteer development programs. By communicating the evaluation results to all individuals and groups affected, a professional administrator or middle manager has established a new baseline in identifying new volunteer needs and, consequently, establishing new goals. Thus, a "staircase" approach to volunteer development results in which the ultimate goal is an effective and efficient volunteer development program that meets the needs of both the individual volunteer and the total organization.

THE I.S.O.T.U.R.E. MODEL OF LEADERSHIP DEVELOPMENT

Boyce (1971) suggests a leadership development model that correlates closely with the basic components of a volunteer development program outlined above. The model's components include identification, selection, orientation, training, utilization, recognition, and evaluation of leadership opportunities. As applied to volunteer development programs, these components are as follows: Identifying volunteer opportunities within the organization and developing appropriate written job descriptions for the opportunities; Selecting (Recruiting) individual(s) best qualified (i.e., with appropriate knowledge, attitudes, and skills) for the volunteer opportunity; Orienting

the individual(s) to both the total organization and the specific volunteer responsibility; Training the individual(s) in developing additional knowledge, attitudes, and skills that will enable them to be successful in fulfilling their volunteer responsibility; Utilizing the volunteer's knowledge, attitudes, and skills in contributing to the success and growth of the organization; Recognizing the volunteer for the positive contributions they make to the organization; and Evaluating the individual's performance as a volunteer.

The I.S.O.T.U.R.E. model has three important benefits when applied to volunteer development programs. First, the model is practical. Although based on leadership development theory, the I.S.O.T.U.R.E. model focuses on the pragmatic aspects of working with volunteers on a day-to-day basis. Secondly, the I.S.O.T.U.R.E. model is easily understood by professional volunteer administrators, middle managers, and other volunteers. The model's components are described in terms that are familiar to all of us, professional and volunteer alike. Finally, the I.S.O.T.U.R.E. model is universal in its application. The concepts of identifying, selecting, orienting, training, utilizing, recognizing, and evaluating volunteers are equally applicable and valid for all volunteer organizations regardless of geographic location and organizational purpose, structure, and size.

SPECIAL CONSIDERATIONS FOR VOLUNTEERS WHO HAVE LIMITED RESOURCES

Individuals who have limited resources want to become involved in their communities. However, in developing and administering volunteer programs, the abilities, needs, and interests of volunteers who have limited resources must be recognized. Furthermore, developing volunteer leadership among economically or educationally limited audiences is often a challenge for volunteer managers and administrators because of their limited understanding and experience with this audience. Caution is advisable in generalizing among socioeconomic groups. However, low-income and disadvantaged individuals often share some of the following characteristics: less than average formal education, modest expectations for achievement, little experience in formal organizations, not future oriented, lack self-confidence, view life as unpredictable, feel powerless, unemployed or underemployed, greater tolerance for stress, conflict, and ambiguity, and/or greater ability to cope in an adverse environment (Extension Service - USDA, 1973).

Slinski (1990) identifies three challenges for professionals working with volunteers who have limited resources. First, internal communications must be considered. Volunteers from limited resource environments often possess low literacy skills and seldom purchase newspapers and other periodicals. They have negative impressions of educational programs and instead rely on peer advice. Secondly, volunteers from limited resource environments often indicate that they feel personally isolated. They resent the "missionary syndrome", wherein new ideas and programs are seemingly forced upon them, and experience negative peer pressure and peer resistance toward participating in volunteer experiences. Thirdly, volunteers from limited resource environments often experience a feeling of community isolation as well. They often display a fear and/or suspicion of authority and authority figures. Turfism and gang boundaries are very real phenomena in their daily lives.

To meet these challenges, Slinski suggests the following encouragement strategies in working with volunteers from limited resource environments: (1) develop a respect for each volunteer as a valued partner; (2) communicate effectively; (3) keep expectations realistic; (4) find individual strengths upon which to build; (5) find positives in even the most negative of situations; (6) get to know the local community; (7) be prepared for the unexpected; (8) project faith in the volunteers; (9) maintain confidentiality at all times; and (10) recognize all efforts and accomplishments. Volunteer managers and administrators must be sensitive to these considerations in identifying, selecting (recruiting), orienting, training, utilizing, recognizing, and evaluating volunteers from limited resource backgrounds.

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CULTURAL DO'S AND DON'TS

Fran Frazier, Program Administrator for Cultural Initiatives, Office of Child Care and Family Services, Ohio Department of Human Services, 3466 Bolton Avenue, Columbus, Ohio 43227-1117, 614/231-3542.

This panel presentation will include information on understanding culturally diverse groups and provide culturally specific behavioral and social information that will help social services and health professionals in their interactions with clients from culturally different backgrounds. The panelists will represent African American, Hispanic, Appalachian and Cambodian communities.

(No Abstract Submitted)

URBAN FAMILIES - CAN YOU HELP?

Mary Lou Langenhop, Assistant Director, Franklin County Department of Human Services, 80 East Fulton Street, Columbus, Ohio 43215, 614/462-4287.

This workshop will discuss several strategies that are being tried to empower and invigorate urban families. What are the issues that we know and believe exist and what are some unique approaches to addressing them? The objective of the workshop will be to help participants build on their own experiences in working with these families and to incorporate aspects of ideas such as family resource centers, intensive home based services, and Wilderness Bond into their approaches.

(No Abstract Submitted)

UNDERSTANDING APPALACHIAN CULTURE

Michael E. Maloney, Consultant, 134 Kinsey Ave., Cincinnati, Ohio 45219, 513/784-0682.

Key Words: appalachian, family culture, migration

This workshop begins with two definitions in response to "Who are the Appalachian people?" The operational definition of an Appalachian is *"anyone who traces his or her ancestry to one of the 398 counties defined as Appalachia by Congress in the Appalachian Development Act of 1965."* This definition is then contrasted with a cultural definition which is stated as *"anyone who shares the culture which developed in the Appalachian region."* Illustrations are then provided to help the audience understand the uses of the two definitions.

Who are the Appalachians in terms of ancestry? Scotch-Irish, Anglo-Saxon, and German settlers came to the eastern edge of the Blue Ridge Mountains during the colonial period. These three groups borrowed from each other culturally and from the Native Americans who had already learned how to live in mountains. The resultant culture eventually spread throughout the Appalachian South and came into southern Ohio with settlers from Virginia and Kentucky. Numerous other national origin groups became part of the Appalachian version of the American "melting pot." Highland and lowland Scots, Welsh, and Irish came from Britain. French Huguenots were early settlers and with the development of the steel and coal industries came Central and Southern Europeans.

African Americans came primarily in two different periods: 1) before the civil war they came to escape slavery, (2) after 1900 they were recruited from the South to work in the coal industry. Each group made its contribution to the culture. In terms of national origin Appalachians are similar to other Americans in their diversity, but both dialect and culture draw heavily from the English/Scottish border country through the Scotch-Irish.

Those who settled rural Appalachia developed a family-centered type of social organization. During the pre-industrial period, which persists in some ways to the present in isolated sections of Appalachia, the family was primarily responsible for economic life, education, the passing on of religious heritage, law enforcement, and political participation. Secondary institutions were weak and mountain people were reluctant to turn over authority to them.

First, industrialization and then two world wars resulted in massive out migration. The return migration eroded the boundaries of the Appalachian cultural world. So whether one is speaking of rural Appalachians or urban migrants and their descendants assimilation is far from complete.

Even though most rural and urban Appalachians now live in nuclear households, kin networks, for many, still perform many of the same functions as in the preindustrial world of agriculture and hunting. Relationships with secondary institutions such as schools and social agencies are very tenuous. School dropout rates for urban Appalachians are higher than those of any other

major group in Ohio. Kin networks may take the form of "stem and branch" families with loci in both rural Appalachian and urban areas. Social workers and educators need to understand the Appalachian family, community structure, and the customs and values that persist in these structures.

Loyal Jones, director of Berea College's Appalachian Center lists ten values which are held by Appalachians. These are (1) religion, (2) individualism/self-reliance/pride, (3) neighborliness/hospitality, (4) family solidarity, (5) personalism, (6) love of place, (7) modesty and being one's self, (8) sense of beauty, (9) sense of humor, and (10) patriotism. Are these values functional in today's post industrial society? How are they viewed from the perspective of our therapeutic culture? Answering such questions and identifying further resources is the focus of this workshop.

HOME SAFETY ISSUES FACING FAMILIES WHO HAVE LIMITED RESOURCES

Rebecca E. Martin, Program Assistant, Home Economics, Franklin County Cooperative Extension Service, 1945 Frebis Avenue, Columbus, OH 43206-3792, 614/443-6200.

Key Words: home safety, hazardous materials/products, toxic/poisonous

"Hazardous materials" - what type of a picture does that invoke in your mind? For many, this term indicates trucks full of chemicals, unsightly factories or dumps letting off toxic gases, or oozing unknown materials. Yet every home can be a warehouse of potentially hazardous materials. Hazardous products are grouped into four categories: Household cleaners, Home maintenance/Improvement products, Automotive Products, and Lawn & Garden Products. Cleansers, oil, batteries, thinners, medicines, pesticides, paint, and other common household products can be earmarked as hazardous products.

Let's take a look at: 1) What is considered hazardous and why, 2) How these products are a concern to you and your community, and 3) What alternatives exist for consumers and residents.

The average household contains between 3 - 10 gallons of materials which we can classify as hazardous. Hazardous materials are defined as *"any materials that when improperly disposed might pose a risk to people or the environment."* There are four major classifications of hazardous materials: Corrosive, Ignitable, Reactive and Toxic.

Corrosive means *"capable of dissolving, wearing or eating away at materials and living tissues by chemical action."* A few common corrosive materials include: metal cleaners, drain cleaners, spot and rust removers, and oven cleaners. The corrosive quality of these products makes them effective. These products when used carelessly have the capability of eating away at any surface which they come in contact with, including your skin, clothing, or other materials. These products most often have two identifying characteristics: they will contain some type of acid as an active ingredient, and they require wearing gloves when using the product. This can be noted on the product label.

Ignitable materials are capable of causing a fire when exposed to an ignition source and they may undergo spontaneous combustion at relatively low temperatures. "Flammable" or "explosive" are also common terms used to identify this class of materials. Ignitable household products include: gasoline, kerosene, diesel fuel, ammunition, matches, and items containing alcohol. Ignitable materials pose real dangers - fire and smoke, and the spread of harmful particles over a large area. These products are threatening in a storage area if spilled, placed in an unsuitable container, or placed next to another flammable product. A products label stating *"Do not store near heat or flame"* or *"Keep in a cool, dry place"* suggests ignitability.

The third characteristic of hazardous products is **reactive**. These materials have explosive decomposition at normal temperature and pressure. The best example of this is old dynamite. During ordinary management these products may react unpredictably (e.g., reacting vigorously with air or water, be unstable to heat, or capable of generating gases). The reactive mixture of ammonia and chlorine bleach produces toxic fumes. Similar to corrosive products, reactive products rely on this characteristic to be effective. These include bleach and many scrubbing and dish washing detergents. Reactive items must be stored carefully. These products can be identified by a label warning *"Do not store near..."* or may state *"Use only in well ventilated area."*

The fourth characteristic of hazardous materials is by far the most identifiable. **Toxic** materials are those that are poisonous to some form of life, and pose a substantial hazard to human health or the environment when improperly managed. Many items in the home are considered toxic (e.g., deodorizers, mothballs, medicines, oven cleaners, pool chemicals, insecticides, and many others). Toxicity is easily identified by the skull and crossbones on the label. Toxic products take three routes into the body - ingestion or swallowing; dermally, through the skin; or inhalation, which is most common with the use of aerosols, reactive materials, or many pesticides which are used outdoors in a less controlled environment.

These four characteristics are not exclusive. Many potentially hazardous products may be classified into two, three or all four classifications. When handling hazardous materials, it is imperative to know with what you are dealing. Keep in mind all these products are chemical mixtures, which need the care a chemist would give them in a laboratory.

To determine proper product management - selection, handling and usage, storage and disposal - **read the label!** This is probably one of the most important messages we have to convey today. The label contains valuable information. It will state how to use the product, the quantities needed and the conditions in which it is to be handled (e.g., proper temperature, and adequate ventilation). A statement of the principal hazard and how to avoid it will appear. Signal words appear on product labels which serve as a guide to the least hazardous product. With household products, "Poison" means highly toxic, "Danger" means extremely flammable, corrosive or highly toxic, and "Warning" or "Caution" means less toxic. Select the product which displays the least toxic signal words or does not require hazardous labeling. "Nontoxic" is an advertising word and has no defined meaning. This may indicate a less toxic product, but the meaning is uncertain. Instructions for safe handling and use will also appear. First aid instructions when necessary or appropriate must appear. However, on many older products many of the antidotes are not in keeping with current recommendations. Always contact the Poison Control Center nearest you in the event of an emergency or your physician. Unfortunately, the label serves as

a product advertisement as well. The above information is often found in tiny print so the consumer needs to look closely. Some labels do not list the ingredients. It is only required that product labels list the amount of ingredients. Avoid products which do not supply adequate information or contact the manufacturer for a Materials Safety Data Sheet or the poison prevention center for information on product ingredients. Recommendations for proper disposal are often vague if listed at all. You can obtain this information from your Solid Waste Authority, Health Departments, County Extension Offices, or Environmental Protection Agency.

How are these products a concern to you or your community? **Household hazardous products** pose safety concerns when improperly used, stored, or disposed. Improper usage may lead to acute health problems. Damage may occur from a one-time exposure to relatively large amounts of chemicals or repeated exposure to relatively low levels of a chemical. These chemicals are contained in routinely used household products. You should avoid harmful exposure and read and follow label directions. Don't assume you, or your older children or others in the home know how to use a product properly. "Use only in well ventilated areas," often suggests that more than one window should be open. Two windows provide a cross breeze or the use of a fan in the area of usage should create adequate ventilation. Toxic, pungent fumes generated from the mixture of bleach and ammonia, or even a dilute ammonia solution alone can irritate the eyes, skin, nose and throat. Chronic irritation can result if used in a careless manner repeatedly.

Proper storage of products should be guided by the clue words on the label - "Don't store near heat or open flame," and other such warning. Improper storage is not only a safety hazard, but is a hazard to children or others in the home who are unable to read label warnings. In 1990, 200,000 childhood poisonings were caused by hazardous household products. Store potentially hazardous products in locked cabinets, out of reach of children. Store products with the label attached, in original or appropriate containers. What to do with an empty container is a question that has caused controversy for some time. Most importantly, a product is rarely "empty" of all chemicals. For this reason, hazardous product containers are seldom recycled, and should be carefully rinsed and disposed.

Household hazardous waste, any hazardous product which is improperly disposed can: a) endanger the environment, b) cause substantial equipment damage and c) threaten the safety of refuse workers, the lives of children and pets. Never burn or dump any hazardous waste on the ground. Do not dispose of any materials "down the sink or toilet" unless you are certain it can be safely disposed in the sewer system. Cleansers which are designed for use with water in the home, such as bath tubs, sinks, showers or toilet bowls, can often be heavily diluted with water and disposed down the drain carefully. Let the water run and rinse the container before disposing of it. This is a better option for residents than inappropriately storing the products, mixing products together or throwing these directly into the garbage. Flammable, explosive, and reactive items which are improperly disposed are a danger in a community garbage dumpster and at the transfer stations and incinerator. Fires and explosions may be costly and deadly to residents and workers. In many cases, disposal is difficult at best. In our society, hazardous waste is guaranteed - by-products of our lifestyle. We use many chemicals daily at home, play, and work. Finding effective alternatives to their use avoids the creation of hazardous wastes from the home.

What are the options or alternatives for residents and consumers? Be a wise consumer. Select less toxic alternatives for needed products when you can. Some products are necessary in our homes, such as disinfectants for our living areas and oil for our automobiles. These can't be avoided, but all must be managed properly. Purchase the smallest size needed for the job and use the correct strength. "If a little is good, more is better" is not a safe philosophy when selecting or using potentially hazardous products. Buying the economy size means that residents have more of a hazardous product to store and may come to realize that a product is no longer effective or becomes more powerful or toxic when stored for long periods of time or exposed to adverse conditions. This is especially true of some pesticides. Using more than what the label prescribes can cause damage to the user and to material surfaces exposed. More product does not equate to being more effective, it often equals damage. Use all products up completely as directed. And finally, is the importance of the product label - read it, follow it and keep it attached. Identify signal words and warning signs with residents, consumers, participants of your programs so that dangers are recognized and safety is number one. Through better selection, careful comparison, and exploration of alternatives, we can make our homes and environments a cleaner, safer place.

In Franklin County, the Cooperative Extension Service, the Columbus Health Department and the Franklin County Department of Health, has created a series of tapes funded by the Central Ohio Solid Waste Authority. These tapes are accessible at the Columbus Metropolitan Library during their hours of service. A listing of alternatives to hazardous products was developed and presented at the Household Hazardous Waste Collection Days. It is provided with the realization that some substitutes do not perform as effectively and may need to be used more frequently. These are not for use on all surfaces, are not a sure cure for all your cleaning problems and in many cases have not been researched. These creations may provide a less expensive alternative in some cases. "Household Hazardous Waste: Selection, Usage, Storage, Disposal" is a comprehensive guide developed in Franklin County to provide general guidelines for safe handling of household hazardous materials. These can be adapted for use in your communities so that local contact are listed as "Resources, Agencies" available.

UNDERSTANDING FAMILY VIOLENCE

Julia Arbin Carbonell, Administrator, Family Violence Prevention and Services Grant Program, Ohio Department of Human Services, 65 East State Street, 5th Floor, Columbus, OH 43215. 614/466-5392.

This session will provide general information on the dynamics of domestic violence and will increase participants' awareness of the cycle of violence, its victims, and its pervasiveness in our society.

(No Abstract Submitted)

THE ANSWERS TO EVALUATING PROGRAMS FOR LIMITED RESOURCE AUDIENCES

Marilyn R. Spiegel, Ph.D., Leader, Evaluation, Ohio Cooperative Extension Service, The Ohio State University, 2120 Fyffe Rd., Ag Administration Bldg., Rm. #4, Columbus, Ohio 43210, 614/292-6182.

Key Words: evaluation techniques, capacity assessment, qualitative evaluation

INTRODUCTION

Focus group interviews with professionals and para-professionals who are working with limited resource audiences in the Cooperative Extension Service served as the basis for identifying what evaluation strategies are currently working with this target audience and to understand where additional areas of help is needed. These focus group interviews revealed that most limited resource audiences have limited literacy and have not been successful in previous educational experiences. These professionals and para-professionals are seeing an increasing number of clientele who represent the "new poor", and they are having outstanding results in working with this group.

Traditional evaluation strategies such as: surveys, questionnaires, and other written evaluations have limited success with these targeted audiences. Gaming, group discussions, face-to-face interviews, and focus group interviews were strategies that the professionals and para-professionals suggested we should utilize more with limited resource audiences.

CAPACITY ASSESSMENT versus NEEDS ASSESSMENT

Many times when we think of limited resource audiences we focus in on all the problems with which they have to cope. These audiences are noted for their deficiencies and needs. Both the political scene tries to address legislation that targets their deficiencies, and the human service organizations attempt to provide them services that teach them about their problems and how to solve them. In turn, these people see themselves as people with special needs to be met by outsiders. The result of this approach is that limited resource audiences gradually become consumers of services with no incentive to be producers. Many learn to "work" the system for survival, sometimes even by illegal means.

Instead of focusing on their needs, let me introduce you to the concept of capacity assessment. "The alternative is to develop policies and activities based on the capacities, skills, and assets of low-income people and their neighborhoods." (McKnight and Kretzmann, 1991, p.2). The most important knowledge is in the community, not from professionals and experts outside of it. When we talk about conducting a needs survey or assessment in exchange for resources, it becomes a degrading process for communities or neighborhoods.

There are two main reasons that capacity assessment is a better approach when working with communities. First, it has been documented that community development only occurs when the local community and its people become involved by investing themselves and their resources in the effort. Secondly, in most low-income communities it is unlikely that major corporations or

businesses are going to rush in to add new jobs in their area. The bottom line is that development must start from within the community before outsiders will offer significant help.

The typical approach to working with limited resource audiences would be to identify local needs rather than assets. We can easily do a "Needs Assessment" in these communities and identify that illiteracy, teenage pregnancy, high crime rates, drug abuse, etc. But, if we are willing to identify their community's assets, capacities, and abilities it will assist individuals and organizations' resources on which to build. McKnight and Kretzmann (1991) point out that "the key to neighborhood regeneration is not only to build upon those resources which the community already controls, but to harness those that are not yet available for local development purposes".

To start a capacity assessment, we need to look at three major resources: (1) assets that are available in the community and are controlled by those who live in the community, (2) assets that are located in the community, but are controlled elsewhere, and (3) assets that are located outside the community and controlled by those outside the community. These three major resources serve as the foundation for helping a community move forward and control their own destiny.

EXPLORATION OF EVALUATION STRATEGIES

Bennett's Hierarchy is what the Extension System often uses to describe different levels of objectives and program accomplishments. This hierarchical chain of events in programs includes seven levels: (1) Inputs: What kind of personnel and other resources were expended on the program?; (2) Activities: What kind of information and methods of delivery were used to interact with program participants?; (3) People Involvement: Who has participated in the program and how much? What have participants done in the learning situation provided by the program?; (4) Reactions: In what ways did the program activities appeal to participants?; (5) KASA Change (knowledge, attitudes, skills and aspirations): Knowledge- What information, understanding and problem solving abilities were gained by participants?, Attitude- How have participants' concerns changed regarding the ideas or practices presented? How have participants' receptiveness to the ideas or practices changed?, Skill- What verbal or physical abilities have participants developed as a result of participation?, Aspiration- What goals have participants established as a result of participation?; (6) Practice Change: What practices have participants changed as a result of participation?; and (7) End Results: How have participants' personal and working lives changed as a result of participation? A definition of each level, an example objective, and appropriate evaluation techniques will be explored.

Qualitative evaluation has great potential when working with limited resource audiences. Specific strategies including focus group interviews, observation, face-to-face interviewing, and case studies. Quantitative methods such as: ranking of usefulness, satisfaction surveys, checklists and self-rating scales will be reviewed.

Small group and hands-on activities will add a practical dimension to the workshop.

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THE PLIGHT OF HOMELESS FAMILIES

Dora Sterling, MSW, Office of Child Care and Family Services, Ohio Department of Human Services, 65 East State Street, Columbus, Ohio 43215, 614/466-5392.

The workshop will focus on specific community planning as well as service delivery strategies to assist families (predominantly women and children) move successfully from shelter and transitioning to safe, stable, affordable, and permanent housing. The array of economic health and social services necessary will be outlined as well as how best to integrate these various supporting services. Participants should best understand the interrelationship between the delivery of housing and human services.

(No Abstract Submitted)

MARKETING PRINCIPLES FOR NON-PROFIT ORGANIZATIONS WORKING WITH LIMITED RESOURCE AUDIENCES

Garry Gibbons, District Specialist, 4-H, Associate Professor, Ohio Cooperative Extension Service, The Ohio State University, Northeast District Extension Service, Ohio Agricultural Research and Development Center, Wooster, Ohio 44691, 216/263-3831; Patrick Carroll, County Extension Agent, 4-H, Ohio Cooperative Extension Service, The Ohio State University, Mahoning County Extension, 490 S. Broad Street, P.O. Box 248, Canfield, Ohio 44406, 216/533-5538.

Non-profit organizations often see themselves outside of the marketing arena. Products, marketing plans, positioning, promotion, and pricing are terms that seldom enter the vocabulary. This workshop will focus on how non-profit organizations can use marketing principles and how their future effectiveness depends on an understanding of marketing principles. More specifically, the workshop will explore the use of marketing principles with target markets within limited resource environments, with a "hands-on" approach for workshop participants.

(No Abstract Submitted)

FOCUS ON FAMILIES

MANAGING LIMITED HUMAN AND FINANCIAL RESOURCES

Carolyn McKinney, Ph.D., Extension Specialist, Family Resource Management, The Ohio State University, 1787 Neil Avenue, Columbus, OH 43210, 614/292-8991.

Co-presenters: Marilyn Spiegel, Ph.D., Leader, Evaluation, Ohio Cooperative Extension Service, The Ohio State University, 2120 Fyffe Road, Columbus, OH 43210, 614/292-6182; Judith A. Wessel, Ph.D., Extension Specialist, Management and Equipment, 1787 Neil Avenue, The Ohio State University, Columbus, OH 43210, 614/292-0858; Claudette Smith, Graduate Associate, Family Resource Management Department, 1787 Neil Avenue, The Ohio State University, Columbus, OH 43210, 614/292-3741; Jackie LaMuth, Franklin County Extension Chair and Agent, 1945 Frebis Avenue, Columbus, OH 43206, 614/443-6200; Bonny W. Chirayath, Cuyahoga County Extension Chair and Agent, 3200 W. 65th Street, Cleveland, OH 44102, 216/631-1890; and Sharon B. Seiling, Ph.D., Extension Specialist, Family Resource Management, 1787 Neil Avenue, The Ohio State University, Columbus, OH 43210, 614/292-4224.

GOAL SETTING AND BASIC MANAGEMENT CONCEPTS

Key Words: household management, family life skills, financial education, credit, capacity assessment

(J. Wessel and C. Smith). This segment focuses on assisting us as educators in teaching goal setting and basic management skills to individuals and families with limited resources. Beginning with where we as educators are coming from, emphasis is placed on understanding differences of limited resource families in the values and goals they hold. Besides cultural awareness, the focus is on helping educators "listen" and understand the need for "patience." Strategies are discussed for "effectively helping" individuals and families with basic management concepts related to managing time and household activities. Current research is highlighted as well as the availability of selected existing resources. A new set of "Homework" leaflets is introduced.

FAMILY LIFE SKILLS - AN IN-HOME APPROACH

Key Words: in-home learning, living skills, family skills, consumer skills

(J. LaMuth). Family Life Skills (FLS) is a series of individualized, in-home learning experiences, designed to help adults in high-risk, low-income families gain competencies to help them cope with their personal home environment as well as the world at large. FLS evolved from the Expanded Food and Nutrition Education Program (EFNEP), a federally funded program delivered successfully by the Extension Service for more than twenty years. EFNEP educators frequently remarked that their homemakers needed assistance with more family resources than just their food dollars. Federal funds, however, limited their attention to basic human nutrition, menu planning, basic food preparation, food and kitchen safety, and

maximizing the food budget. FLS was created to move beyond EFNEP and address the management and maximizing of other family resources including money, time, space and belongings, and family interaction. Programs with goals and program elements similar to FLS including Developmental Living Skills (DLS), a Butler County, Ohio program, were reviewed. Funding for the program came from the combined efforts of the Columbus Regional office of HUD, The Columbus Metropolitan Housing Authority, Franklin County Department of Human Services, City of Columbus Department of Human Services and The Ohio State University Extension Service. The program has been included in several Drug Elimination Grants. These grants are examining the theory that members of strong families can deflect outside pressures to become involved in drugs and other illegal activities, that family members who can lean and depend on each other can avoid developing destructive behavior. Parents, who given the opportunity, will try to provide their children with a safe, sanitary, and pleasant home environment.

FLS educators teach by sharing information contained in seven different series of lessons. The series are: Money and Resource Management, Home Management, Child and Family Development, Clothing Selection and Care, Consumer and Community Skills, Personal Family Health and Appearance, and Senior Living Skills. Educators work by appointment in the individual homes of the participants. Lessons average 45 minutes in length and include some "hands on" activities to reinforce the learning. Printed materials have been written at third to fifth grade reading levels. Program materials are designed to emphasize positive achievement and accomplishments. For example, during the first visit a "What I can do and know now" form is completed rather than a "needs assessment". Rather than focus on what the participants do not know, those skills and knowledge the participants do have and know are highlighted. As new skills are mastered and new knowledge is learned, the "What I know" Form is filled in. Existing and new skills are reviewed as the lessons continue. One lesson builds on another. Upon completion of the series, participants take part in a graduation ceremony where their achievements are applauded, and they are encouraged to continue learning. As part of the ceremony, new graduates speak about the program's importance to them.

One graduate said she is sure she would have lost her children if FLS hadn't come along. Another graduate said that she was now saving \$10 a month. Another said the educators worked with her...actually showed her how to get rid of as well as avoid wrinkles in her clothes.

Although the primary objective of FLS is the development of strong confident families with members who can function in today's world, self esteem is considered to be a by-product. The program doesn't talk about self-esteem. Instead, educators work to maximize participants' opportunities to have successful experiences. Participants discover their capacities to influence and control their immediate home environments, and later their neighborhoods and communities. Participants learn basic skills and strategies that they then use as they become more involved in their local community issues.

The program staff consists of a program coordinator who also works with families and four .75 FTE educators who meet with fifteen - twenty families weekly. In-service training and updates are regular parts of the educators' work schedule. A secondary purpose is to increase the employability of the educators, improve their work and program skills. Educators are encouraged to work together and be creative. Several innovative learning activities initiated by

program educators are FLS Bingo and the Self-Esteem Walking Team. During both activities, educational information is integrated with the enjoyable, social activity. Participant involvement can range from six to thirty-six weeks.

Program participant referrals come from a variety of sources including: Franklin County Children's Service, the Public Housing Authority staff and orientation classes, EFNEP, Public Housing Community Resident Managers, and the Columbus Public Schools. The most successful referrals, however, come from the current participants themselves. They sell the program.

A NEEDS ASSESSMENT PROCESS IN DEVELOPING A MONEY MANAGEMENT SHORT COURSE

(B. Chirayath). Presentation focuses on the development of a short course in money management for clientele with extremely limited resources. The formation of a community review committee is discussed. An overview of the content of the short course is included along with a progress report of the project.

CREDIT EDUCATION FOR LIMITED RESOURCE FAMILIES

(S. Seiling). Five new credit publications are now available for use with limited resource audiences. The topics were chosen to respond to the needs of an audience who may not have the access to credit choices that many middle class families would have.

"Handing Credit Problems" is concerned with reducing a too heavy credit load. It includes simple suggestions on how cut back on credit use and work with creditors to pay debts.

"Rent to Own" discusses a specific type of credit often used by limited resource clientele. It lists factors to consider and questions to ask when choosing rent to own as a way to purchase goods.

"Borrowing to Pay Bills?" covers bill consolidation. It lists some pros and cons of getting a new loan to pay existing bills. It also suggests alternatives to bill consolidation for those who have more debt than they can comfortably pay off each month.

"Bill Collectors" discusses consumer's rights under the law as they relate to bill collection agencies and their activities. It specifically lists what cannot be done in the process of trying to collect unpaid bills.

"Beware of Credit Repair" is concerned with the often fraudulent claims of credit repair clinics. It emphasizes what people can do for themselves to correct mistakes in their credit files. It also lists what is contained in a credit file.

These five publications could be used as a set or individually. They could be the focal point of a lesson for a group, or they could stand alone as handouts or in a display for clientele to pick up and take home to read later. They are all written at about fourth grade reading level, so some literacy skills are necessary for direct use by the audience.

IDENTIFYING HUMAN RESOURCES USING A CAPACITY ASSESSMENT

(M. Spiegel). Many times when we think of limited resource audiences we focus in on all the problems with which they have to cope. These audiences are noted for their deficiencies and needs. Both the political scene tries to address legislation that targets their deficiencies, and the human service organizations attempt to provide them services that teach them about their problems and how to solve them. In turn, these people see themselves as people with special needs to be met by outsiders. The result of this approach is that limited resource audiences gradually become consumers of services with no incentive to be producers. Many learn to "work" the system for survival, sometimes even by illegal means.

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IDENTIFYING MONEY MANAGEMENT SKILLS & PRACTICES USING A CAPACITY INVENTORY AND SELECTED TEACHING MATERIALS FOR MONEY MANAGEMENT.

(C. McKinney). Two versions of a budgeting survey are presented for participant completion and discussion. A six-part series of revised budgeting leaflets are introduced ("Budget Survey," "Take Charge of Your Family Budget," "When Are Your Bills Due?," "Buying on Time--Is It Eating a Hole in Your Budget?," "It's Amazing Where the Money Goes," and "The Great Budget Balancing Act"). This set of leaflets is designed to be used as a series. Other selected money management materials are highlighted.

NEIGHBORHOOD FAMILY CENTER

Nina McLellan, Senior Planner, Federation for Community Planning -614 Superior Avenue, N.W., Suite 300, Cleveland, Ohio 44113, 216/781-2944.

Co-presenter: Debra Lewis Curlee, Planner, Federation for Community Planning - 614 Superior Avenue N.W., Suite 300, Cleveland, Ohio 44113, 216/781-2944.

Key Words: service/system integration

NATIONAL TREND

There is a national trend toward more comprehensive and holistic family services. An increasing number of states are supporting family center networks including: Vermont, Maryland, Illinois, Connecticut, Minnesota, Hawaii, Oklahoma, Missouri, Kentucky, Pennsylvania, Iowa, New Jersey, and Wisconsin. The National Family Resource Coalition is a clearinghouse of information on both state and local family resource and support initiatives.

The family center approach provides a strategy for collaboration and service integration for the purpose of strengthening families and the communities in which they live. It is an alternative to the present human services pyramid in which funders direct services to providers to address specific problems for individual recipients, thereby fragmenting families and proliferating separately administered and often overlapping services.

The goal of the family center is to establish an integrated, family-focused service delivery system at the neighborhood level which will empower families, strengthen neighborhoods, and increase access to services and supports.

Family centers are asset-based and capacity building; holistic in their approach to families; based on reciprocity and partnership with families; and culturally competent. The family center mission is to build family strengths and stability for all neighborhood families--especially those with children--and enable families to support and build strong communities. It builds on and coordinates existing services both public and private.

WHAT IS A FAMILY CENTER

A family center is both a concept and a place. As a concept it means (1) the integration and coordination of a single delivery system in the neighborhood, of activities and services needed by families building on existing family and community assets and (2) the enabling of neighborhood families for mutual help and community action. As a place, a family center is accessible and welcoming and can be located in a school, community center, child care program, or other organization with a commitment to the neighborhood and the trust of neighborhood residents. Family centers provide a place where family members can drop in, meet in groups, participate in positive activities, find direct assistance and referral, and move toward individual, family and neighborhood goals. Family centers provide support and assistance to some families in their own homes.

Family center initiatives should emerge through community planning and involve residents, neighborhood institutions, and service providers. The planning process should build consensus on priorities for service and activities.

Control over the necessary resources and conditions of life is essential for individual, family, and community well-being. Pervasive lack of power to control the forces which affect one's life conditions is extremely stressful and even life-threatening. Empowerment of families and the community is a goal of family center services and activities.

FAMILY CENTER PRINCIPLES

Family centers vary from one neighborhood to another, but all should share the following family support principles. They should: (1) Serve families holistically, focusing on the family unit; (2) Offer universal access, welcoming neighborhood families regardless of income, marital status, race, religion, extent of need, or other factors tending to stigmatize them; (3) Promote development and prevent problems, providing opportunities for fun, individual development, and assistance before serious problems emerge; (4) Support reciprocity and partnership, involving families not as "needy clients" but as partners who contribute, share responsibility, and can be producers and leaders; (5) Build on assets and develop capacity, moving from a relief to a development approach, assisting families and neighborhoods to identify and build on their individual and collective capacities and resources, support families and neighborhoods to solve problems and obtain needed resources; (6) Be flexible and accessible, responding to participant interests and needs and ensuring that activities and services are easily available in terms of location, time, and friendliness, providing services in the home when needed; (7) Strengthen personal support systems, maintaining sustained relationship, and facilitating mutual helping; (8) Value cultural diversity, responding sensitively and creatively to differences in culture, race, gender, class, age, and ability; (9) Practice collaboration, coordinating and integrating existing services and programs, and mobilizing and expanding resources and support; (10) Ensure

quality, providing sufficient numbers of effective staff, adequate staff support and training, and well-equipped, inviting physical setting.

WHERE ARE FAMILY CENTERS LOCATED

Family centers may be expansions of existing organizations such as: neighborhood centers, community action agencies, religious institutions, day care, or Head Start Center. In some cases, a consortium of organizations will sponsor the family center with one organization acting as fiscal agent and administrator. Operating agencies may be public or private non-profit organizations, including schools.

STRUCTURE

Three levels of participation are identified to structure basic family center functions--Access, Group Activities, and Family Assistance. Level I: Access, ensures a welcoming, non-threatening entry into the family center, its activities, and services. It welcomes participants as members. The activities and services at Level II: Group Activities facilitates individual development, mutual support and community action. Level III: Family assistance responds to family requests for help based on a family development approach--helping identify goals and aspirations, strengths and resources, providing help in accessing services, developing skills, and support systems.

OPTIONAL SERVICES

Services and activities offered by family centers vary by neighborhood in response to priorities set by neighborhood residents. They may not be traditional services. In all service areas opportunities are identified for (1) the involvement of the whole family, (2) service integration, (3) improved accessibility and, (4) the development of family and community capacity.

A number of services and collaboration strategies have been identified as being appropriate for comprehensive family center programming. These include: child development and parent education, after-school activities for school-age children and youth, programming for men, meeting the needs of older persons and intergenerational activities, improving health, addressing substance abuse, providing adult and family education, improving family economic opportunities, and developing a flexible team approach to clinical support services.

STAFFING

Because of the collaborative nature of the family center, staff from different agencies may be based at the center. Whether staff is employed by the administering or other agency, the integrated nature of the family center model requires a staff team approach, including shared training, regular meetings, and access to consultation. The team ensures coordination among all services and activities. For staff to work in ways consistent with family support principles, the work environment must embody those principles. Family centers should employ neighborhood residents as much as possible, as well as involving residents in volunteer capacities.

FUNDING STRATEGIES

The key to supporting service integration for families in funding which can be used: (1) for holistic family services rather than categorical programs; (2) to respond flexibly to individual family needs; (3) preventively, before problems become severe; (4) to provide on-going as well as start-up funding; (5) to reduce the number of proposals and paperwork for local agencies; (6) and reduce state administrative costs.

There are a number of possible funding strategies to support the family center approach: (1) State Family Resource and Support Fund or Account; (2) Administration of EPSDT (Healthcheck) and At-Risk Pregnancy Program; (3) EPSDT Reimbursement for Preventive Health and Treatment Services; (4) Contracts with County Public Agencies for Services to Eligible Clients; (5) Co-location and Coordination of Resources; (6) Public Housing, HUD Initiatives, and McKinney Act; and (7) Local Funding.

HEALTH CARE WITH LIMITED RESOURCES

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SUPPORTIVE SERVICES--KEEPING CHILDREN WITH THEIR FAMILIES

Key Words: supportive services, aids, eldercare

(C. Anthony). Despite the abuse or neglect that children may suffer at the hands of their parents or other individuals whom they view as their primary caretakers, children prefer to remain with their families. Children experience a great deal of anxiety and grief when they are separated from individuals with whom they share an emotional bond. It cannot be assumed that abused or neglected children are unloved or unwanted by their parents or families. The causes of abuse and neglect are as diverse as the personalities and life experiences of the parents and children involved. Children who are particularly difficult to manage due to behavioral or medical problems may challenge the patience of even the most tolerant of parents. A colicky baby who is irritable, cries endlessly, and seems incapable of being soothed by a loving voice or a gentle touch may push a parent who has no support from family, friends, or medical staff to both mental and physical exhaustion. A child with attention deficit disorder who is hyperactive and appears to not listen to anything the parent says, may push a parent to his or her creative limits in attempting to manage the child's behavior.

A parent who was neglected, or who was physically or sexually abused as a child and who lacks the necessary insight into his own feelings regarding the neglect or abuse, may exhibit the same type of behavior with his child. A parent who is under stress or who is experiencing a situational crisis may overreact to normal childhood behavior. Lack of knowledge or lack of appropriate role models from whom child caring skills can be learned, may result in another parent having unreasonable expectations. A parent who suffers from emotional, mental, drug or alcohol problems, who is too caught up in his own needs may be unable to meet the basic physical or emotional needs of his children; while another parent may be emotionally incapable of forming any significant attachment to his child. Even in cases where there appears to be very little emotional bonding between parent and child, removing a child from his family and from an environment which is familiar to him, no matter how chaotic that environment may seem, and placing that child into another home with individuals who are unfamiliar to him, who talk and interact differently than his family, and who maintain different schedules to which he is accustomed can further traumatize a child whose life is already in a state of crisis. Intervention to protect the child must be in the child's best interest. This necessitates a weighing of which risk is greater, the risk of further abuse or neglect should the child be allowed to remain with his parents, or the risk of traumatizing the child as a result of removal and subsequent placement into foster care.

This growing awareness of the traumatization that children experience as a result of being removed and separated from their parents, prompted the enactment of the Child Welfare Act of 1980 (Public Law 96-272 U.S.C. 42). This federal law changed the emphasis from removing abused and neglected children from their homes by providing supportive services to either enable families to remain together or to establish permanency for children who should not be returned to their parents. Thus, if a parent's method of disciplining his child resulted in injury, a children services agency would be required to offer services such as parent education to teach the parent among other things, alternate forms of discipline; individual and/or family counseling, to help the parent address any underlying issues that might be contributing to the parent's attitude or behavior with his child and to help the child address any underlying issues that might be contributing to any behavioral problems; and/or any other services if their provision would enable that child to safely remain at home and prevent the child from being removed. If a parent's poor housekeeping skills and failure to effectively manage money resulted in a child living in unsanitary conditions and being insufficiently fed or clothed, a children services agency would be required to offer services such as environmental management to improve the child's physical living conditions; parent education to teach the parent basic child care skills; homemaker services to assist the parent in his own home to learn how to manage the household and properly care for his child; and/or any other services if their provision would enable that child to safely remain at home and prevent unnecessary removal. For those children who must be removed and for whom reunification with parents is not in the child's best interest, a children services agency would be required to provide services to enable the child to be placed with an adoptive family or other permanent arrangement.

Services to protect children and ensure their emotional, mental and physical health are administered in Ohio at the county level by 88 county public children services agencies; therefore, the types of supportive services available to families vary from county to county. The Ohio Department of Human Services is the state agency having the authority to develop administrative rules to ensure that these county children services agencies are following federal and state requirements in the provision of supportive services.

When a family is brought to the attention of a children services agency either by a neighbor, a family friend or a professional person such as a doctor or a teacher who according to Ohio law is required to report child abuse or neglect, a children services agency must initiate an investigation within 24 hours (or sooner depending on the risk of harm to the child). A children services agency is responsible for providing or arranging for any services necessary to protect the child during the course of an investigation and upon determining the disposition. Protective services are provided without regard to a family's financial status.

Anytime that supportive services are to be provided to a family, a case plan must be developed. A case plan, an ongoing planning process between the family and the children services agency, involves one of three permanency goals for the child: the prevention of removal of the child from his home; the reunification of the child with his family; or the permanent placement of the child including but not limited to freeing the child for adoption. The development of a case plan involves an identification of the problems and/or needs of the family and actions certain parties will take to address the problems or needs.

The Child Welfare Act requires that parents be included in the entire case planning process. Case plans in which the child's permanency goal is to prevent removal and the parents agree to participate in services require no court order for implementation. Case plans in which parents are not in agreement with the permanency goals, individual goals, or services that the children services agency perceives as being in the child's best interest, require a court order to implement. If the children services agency believes the child is at risk of being abused, neglected or dependent, the agency must seek a court order.

The Child Welfare Act of 1980 and a consent decree (Roe vs. Staples Civil No. C-1-83-1704 (S)), a settlement resulting from a lawsuit filed against the Ohio Department of Human Services on behalf of children and families residing in Hamilton County, require the Ohio Department of Human Services to provide the necessary oversight to county children services agencies to assure that supportive services are provided to families in order to prevent children from being unnecessarily removed from their homes and to reunite children who have been removed, with their families. The consent decree specifies which types of supportive services are mandatory in every county. Mandatory supportive services include: adoption, case management, diagnostic, emergency shelter, information and referral, life skills, therapeutic, unmarried parent, substitute care, homemaker or home health aide, and protective day-care.

A waiver from providing homemaker or home health aide and/or protective day-care supportive services may be granted to the county agency if the county agency certifies that either the service is not needed by a significant number of persons within the county and the cost of providing the service is undue or excessive when compared to the benefits to be derived from the service; or the service is not available from the county agency or other community resources within the

county and the cost of providing the service is undue or excessive when compared to the benefits to be derived therein. County agencies must also make available a minimum of three other supportive services including: community education, crisis services, emergency caretaker, employment and training, environmental management, parent aide, parent education, crisis nursery, day treatment or volunteer.

Supportive services may be provided directly by employees of the county children services agency; by private providers in the community who are under contract with the county children services agency; or through cross referral and coordination with other public agencies such as the Department of Health which administers the Women Infants and Children (WIC) program for maternal and child nutrition, the Department of Human Services which administers public assistance programs, and the Social Security Administration under the Department of Health and Human Services which administers some assistance programs for the disabled.

While supportive services are deemed crucial to keeping families together, studies measuring their success have been hampered due to the need for any valid study to have a population not receiving supportive services for comparative purposes. Due to human needs being involved, there would be moral dilemmas in denying some families services merely to conduct a valid study. In addition, compliance issues would prohibit the withholding of services which are required by federal and state mandates. Measuring the overall success of supportive services throughout the state has also been hampered due to the variation in programs and types of families referred to the programs in different counties.

The Ohio Department of Human Services contracted with the Mandel School of Applied Social Services, Case Western Reserve University to conduct a statewide study to determine the availability of supportive services and to determine unmet service needs to families in Ohio whose children are at risk of abuse, neglect or dependency. The Ohio Supportive Services Needs Assessment Technical Report was issued by the Mandel School on June 29, 1990. The study found the rate of out-of-home care or foster care placements resulting from removals, to be 40 per 10,000 children. Poverty was a contributing factor in the removal of 38% of the children from their homes. Neglect, inadequate supervision, and physical abuse were the most frequently reported child maltreatment types. Parents were unable to provide adequate environments in terms of shelter, safety, and utilities for their children in 29.9% of the cases in the study; sexual abuse was reported in 8.8% of the cases; and incest occurred in 5.1% of the cases.

Economic difficulties and an inadequate living environment were found to be major stress factors for approximately fifty percent of the families involved with children services agencies. The majority of the families were relying on public assistance programs for financial support. Substance abuse by caretakers (50.5%) and family violence (e.g. spouse abuse) (20.9%) were other major stress factors to families' involvement with children services. Problems for children included health problems, learning disabilities, and mental retardation or developmental disabilities. Approximately 65% of the children had experienced previous placement, 24% of which experienced more than one placement.

Cases which were closed by children services agencies due to no further need for intervention, typically involved families having the following characteristics: older parents or caregivers, more adults in the home, higher educational level of the caregiver, and fewer children outside of the home. A greater portion of cases with the following presenting problems remained open: inadequate environment, dependency, and substance abuse.

The report concluded that in order to adequately and accurately address child and family service needs, a number of supportive services would need to be provided more frequently. Parent aide services and homemaker/home health aide services, both of which are more intensive services to assist and teach parents household management and child care skills in the family's own home were underutilized, as were housing services to assist parents in finding suitable residences. Parent skills training is a substantial area of unmet service needs. The lack of appropriate housing as opposed to other child, parent, or family problems is a significant factor in children being removed. Thus unaddressed housing needs could be a potential obstacle to successful family reunification. More units of counseling and therapeutic services are needed in addition to more inpatient and outpatient alcohol and drug treatment services.

Although success of supportive services programs is difficult to measure, when families want to stay together and the provision of services will allow children to safely remain in their own homes. It is not only more cost effective to provide supportive services than it would be to remove a child and subsidize a foster care placement, it allows a child to remain with those with whom he shares an emotional bond; a past, a future. In cases where a child's immediate safety would be at risk, a child should be removed from his home, and the family provided with appropriate services to facilitate the child's return.

ELDERCARE

Key Words: AIDS, eldercare, children, prevention, supportive services

(J. Birkhoff). American society faces an unprecedented challenge as the size of the elderly population approaches 35 million by the year 2000 and the state of Ohio faces this challenge as well. The provision of adequate physical care for the elderly citizens of the state will place extraordinary demands on state-funded services for the elderly. This problem is compounded by declining federal support.

Some common ailments affecting the older elderly are chronic disorders such as heart conditions, arthritis, respiratory difficulties, and cancer. These disabilities reduce the abilities of these elders to function independently. By age 85, a large percentage of both men and women are experiencing limitations in basic activities of daily living such as bathing, dressing, cooking/eating, toileting, and walking. Other characteristics of Ohio's elderly indicate that over 30 percent are currently living at or below the poverty level. Older women living alone, minorities, and those over 75 suffer disproportionately from this economic plight. The health care costs of hospitalization and medications seriously erode their limited fixed income and savings. Elderly out-of-pocket spending for health and long term care is further impoverishing this population.

Another characteristic of this age group is that the majority live alone. Isolation and lack of socialization often leads to neglect. The loss of contact and support often results in an elderly person falling into a critical health situation unnoticed. Today's middle-aged adult is more likely to have an elderly parent to care for than in previous generations. Care of the frail parent has traditionally been the responsibility of a married daughter or daughter-in-law who is at home caring for their children. With most of today's women joining the work force, the number of caretakers has decreased at a time when the numbers of old-old have increased. These trends may well place excessive financial and other demands on families which can lead to abuse and/or neglect.

Public awareness is one key issue in preventing neglect cases among the elderly. Elder abuse/neglect situations often go unreported because of the isolation. Because the older elderly seldom leave their own dwellings, they may become too incapacitated to report their critical need for care. While efforts have been made to make the public aware of this growing problem, many situations of elder abuse/neglect remain undisclosed or unreported because they fail to come to the attention of the community service network. Efforts have been made through statewide conference and training programs for professionals who serve the aging network to increase public awareness.

Additional funding would be helpful to further develop this educational effort. With the cutbacks in federal and state funding, local private agencies, individuals, and civic organizations can help to underwrite the cost of this kind of activity.

With increased awareness and reporting comes the need for additional services to support the health needs of the frail elderly to prevent endangerment and, where possible, institutionalization. In the past this has meant the need for increased funding. Increased need and decreased funding will certainly tax the resourcefulness of the service providers.

Beyond the obvious solution of merely giving localities additional dollars for elderly services, there are other forms of assistance. Sound planning and administration are necessary to stretch scarce human service dollars. We can no longer afford the luxury of groups that vie against one another for available funds in order to protect their own particular programs.

Coordination of services to the frail elderly is a must. An Adult Cluster approach can do much to effectively coordinate existing community resources. This means that program administrators and service staff be knowledgeable of the specific roles and responsibilities of other agencies in the Adult Services network. In other words, the multi-disciplinary approach can assure the widest availability of needed services.

As adult service workers, health professionals, law enforcement officials, legal professionals, mental health workers, and others are enabled by formalized agreements to coordinate efforts, the delivery of the needed health services to the frail elderly will be made more cost effective. Without sufficient assistance, many families can all too easily end up in the position of taking on more than they can reasonably handle. The American Association of Retired Persons (AARP) points out that the average length of home-care for the severely dependent elderly over 70 is almost six years. This frequently imposes unmanageable physical, emotional, and financial burdens on families. The medical costs can become overwhelming and lead to neglect.

At present, cases of neglect need to be referred to the Adult Protective Services sections of the county departments of human services. These reports will then be investigated and an appropriate service plan initiated to provide a safety net of services for those in need. Protective services may include, but are not limited to, case work services, medical care, mental health services, legal services, fiscal management, home health care, homemaker services, housing-related services, guardianship services, and placement services, as well as the provision of such commodities as food, clothing, and shelter.

AIDS

(J. Birkhoff). HIV continues to infect Americans regardless of sexual orientation, race, gender, or age. The trend, as we enter the second decade of AIDS, is that the virus does not discriminate. It can no longer be said that only gay white men are infected. Increasingly, this is becoming a disease of heterosexuals, male and female teenagers, and infants. Additionally, this virus seems to strike those persons least economically able to afford the expensive long term care AIDS requires. Unlike the homosexual community, which has responded to AIDS, sharing resources to care for its members, teens, drug abusers, and the poor lack the same sense of commitment that has sustained the gay community. The care for the current and future group of persons with AIDS will become the responsibility of an already overburdened public health and social service system.

There is no cure for AIDS. A vaccine to prevent infection is at least ten years away. And yet no person need ever be infected again. We currently know all that we need to do to prevent further transmission of HIV. What we lack is the leadership to make this information available to every individual at risk of HIV infection. Issues such as politics, morality, and family values have been allowed to cloud what should be a basic public health issue.

Prevention is the key to stemming the spread of HIV in the current at-risk population groups. Teens are particularly at risk. AIDS is now the six leading cause of death among 15 -24 year olds. In the past three years incidence of HIV infection has increased by 77%. HIV strikes nine times as many men as women among the adult population, but among teens the male-female ratio is four to one. This statistic combined with the rising rate of teen pregnancy means an increasing number of infants will be born HIV infected. Between 1990 and 1991 the rate of HIV infection in infants rose 38%, compared with 11% for homosexual/bi-sexual men during the same time period. AIDS is now the ninth leading cause of death in young children age one to four. AIDS in children, called pediatric AIDS, disproportionately affects minority children. Although African-American children constitute 15% of the nation's children, they represent 60% of all pediatric AIDS cases. Hispanic children who represent 10% of the children in the U.S., account for 22% of all children's AIDS cases.

Prevention strategies need to be modified to reach the current at-risk groups. Teens typically do not respond to messages targeted at adults, and do not respond positively to messages deemed as "preaching". Messages of abstinence from sexual activity and drugs have failed to change adolescent behavior. Programs with some success in reaching teens are teen to teen contact in small discussion groups in a young person's community or "turf". Lack of knowledge about how the virus is spread and prevention methods are still major contributing factors to teen HIV infections.

Reaching the drug using community requires extremely non-traditional creative methods. Some programs experiencing success include having former addicts work the streets and drug/crack houses with information about needle precautions and safer sex strategies. However, for most substance abusers the next "high" takes priority over personal safety issues. In many cases, it is necessary to deal with an individual's drug addiction before any HIV related health issues can be addressed.

A community response to AIDS must be a combination of prevention messages and strategies, public health, and social services. Often services must be delivered to persons with little or no resources prior to HIV infection.

PARENTING YOUNG CHILDREN: FOR THE PROFESSIONAL WORKING WITH FAMILIES WHO HAVE LIMITED RESOURCES

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This workshop will include an overview and discussion of skills involved in parenting young children and issues that professionals may encounter when working with their clients' parenting skills. The objectives are to: refresh and supplement participants' knowledge of parenting young children; increase participants' awareness of issues surrounding parenting practices; and help participants develop tools to use in working with limited resource families with young children.

(No Abstract Submitted)

VOLUNTEERISM WITH A FAMILY FOCUS

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Key Words: limited resources, volunteers, volunteerism, family, family volunteers

COMMON ADULT ATTITUDES TOWARDS YOUTH

"Go to school, have fun with your friends, stay out of trouble." What a way to become an adult!". Lipsitz's quote (1979, p.18) sums up the attitude of many adolescents. Society puts adolescents "on-hold" while telling them to be responsible but giving them no opportunities to act responsibly. Young people need to experience a variety of adult-like roles in safe community settings with the support of adult mentors. The common denominator of studies dealing with adolescent and adult interactions is the adult-youth relationship. Scales (1991, pp.42-43) cites numerous reports of educators and researchers all leading to the developmental issue of how society "can ensure that young adolescents establish reliable and caring attachments, particularly with adults".

According to Scales, service and opportunities for community connections are some of the key recommendations in most blue ribbon panels focused on youth-at-risk. Some adults however, would argue that teens have neither the time nor the motivation to volunteer in their community. A recent survey by The Independent Sector (1991) suggests that teens are volunteering at the same or higher rates as adults. Teens indicated that they want to contribute in their communities and do something useful because they think they would enjoy the work.

Popowski (1985) reports that teens in Chicago identified self-esteem development, caring about others, and community pride as major motivators for why teens volunteer. Eighty percent of teens surveyed had positive feelings about their volunteer involvement. They felt their work was meaningful, important, and needed. A disturbing aspect of the study deals with why some students subsequently quit their volunteer work. Most reasons for leaving, other than "time", were internal to the organizations where they were working: e.g., lack of respect, impatience, and adults being too bossy.

NEEDS OF ADOLESCENTS

With mounting evidence that early adolescents seek out community involvement in partnership with adults, what are specific adolescent needs? The Center for Early Adolescence has developed a framework of seven key developmental needs that characterize adolescence (or 10-15 year olds). These are: (1) positive social interaction with adults and peers; (2) structure and clear limits; (3) physical activity; (4) creative expression; (5) competence and achievement; (6) meaningful participation in families, schools, and communities; and (7) opportunities for self-definition.

According to Groff (1987), if teens are going to volunteer their talents and time, it is necessary for adults to be involved in a meaningful way. The Salvation Army (1984) also suggests that the adult volunteer leader is the principle ingredient of successful teen programs. They identified that it is not enough for adults to have technical knowledge and skills, but that their attitudes and values permeate everything that happens. They note that teenagers are quick to spot "phoniness" in adults and, as a result, any chance of learning is often lost.

MANDATED TEEN VOLUNTEERISM

There is a growing movement in some areas of the nation to mandate volunteer community service for middle school and/or high school students as a prerequisite for graduation. Some such programs currently exist; numerous others are currently in the legislative or developmental phase. In some schools, the mandated service is incorporated into the existing classroom curriculum (very similar to the concept of 4-H school enrichment programs) while in others, students choose their own volunteer activities and simply document their volunteer efforts and hours.

The concept of service-learning has been a traditional curriculum component of many private schools for years (Ellis, Weisbord, and Noyes, 1991). However, the concept became an issue in the nation's education reform movement only in the late 1980's. Those in favor of mandated student community service consider it an excellent method to encourage youth to become more involved in their local communities while making education more relevant to real-life situations, motivating those who are under-achievers, and lowering dropout rates. Currently, states such as Minnesota, California, Vermont, and Pennsylvania are incorporating service learning into their K-12 public school programs. The emphasis in these programs is to design curricula that teach the values of community service and involvement, and then apply classroom learning to real-life volunteer situations.

Ellis et al. (1991) offer an excellent discussion concerning the background of and issues surrounding "The 'Mandating' Controversy" (p. 5). They emphasize an important question when they state that "the majority of such programs are at the high school level but the trend is to extend the requirement down through kindergarten. The question on the minds of many is: if such service is mandated, is it voluntary?". They conclude that "mandating the performance of community service (by teens) is not a problem if there are choices at every stage for the students to select the type of service they want to do".

FAMILY VOLUNTEERING

A method of involving youth in volunteering is also a way to involve more volunteers: Family Volunteering. Family volunteering is the intergenerational involvement of family members in community service. Allen & Harrison (1983) in her study of Families Volunteering indicates that this concept assumes the volunteers will come from different generations, be they parent/child, grandparent/parent/child or other combinations rather than just two adults.

When family members volunteer together it provides more acceptance on the agency or community's part of the youth involved as adults accompany them. Allen and Harrison (1983) list several benefits of family volunteering: (1) it can increase the number of volunteers available by adding young people; (2) it responds to a major reason for people not volunteering..."I do not have time for my family"; (3) it may help develop relationships; (4) it builds a pool of new young volunteers; and (5) the experience can help family relationships as it focuses on a positive shared experience. Family volunteer can also meet many of the needs expressed by youth through not only volunteering, but also this shared family experience. The authors site a Salt Lake City program which involved parents who are experiencing difficulties with their children. Families who enroll are encouraged to take additional courses upon completion of the initial

program and then return to teach new families. This reinforces learning for the adults and youth and helps new families to relate to the teachers.

Allen and Harrison (1983) tell of success with family volunteering in times of "crisis", especially with refugees or people trying to cope with a new environment. Families are acting as "host families" for international students in Bellingham, Washington, providing support to the students during their first walks at Western Washington University. In Columbia, Missouri, a Cambodian Cultural Festival is planned and conducted by volunteer families to promote international understanding.

The North Carolina 4-H TRY (Teens Reaching Youth) program was designed to empower adults to accept teens as educational resources and partners. Two objectives of the program apply to adults: (1) to acquire an understanding of their helper/mentor role and (2) to accept teens as co-leaders. The design of the program incorporates the following strategies to accomplish these objectives: (1) an adult coach is teamed with two or three teens to give adults first-hand experience with successful teen acceptance of responsibility; (2) all team members sign a team agreement specifying their goals and each member's contribution toward their goals; and (3) adult and youth team members are trained in the same content at the same time. The adults are given the name of "coach", but everyone learns how to coach each other.

The 4-H Teens Reaching Youth program was developed to enhance self esteem in teens. Scales (1991) suggests that educators often fail to recognize the two major aspects of self esteem: (1) self worth (the belief in one's own unique value), and (2) self-efficacy (the belief in one's ability to accomplish objectives). The area of self-efficacy, where teens realize there are real consequences to their behaviors, is a more difficult concept to address. He concludes that opportunities for young people to have an impact in the real world must be provided them.

In addition to shared decision-making, the TRY training program includes sessions on coaching, team building, and designing learning, marketing, and planning experiences. The program has three levels of objectives: (1) teens learn to teach prepared lessons to six to eleven year olds; (2) teens learn to write lessons about topics of interest to them and test them with a youth audience of appropriate age; and (3) teens learn to plan and conduct TRY retreats with their peers. The evaluation of the 4-H TRY program led Groff (1987) to conclude that peer helper type programs where adults and youths are trained in the same setting and have a shared set of team expectations are an excellent way to help adults shape their own attitudes.

Findings of the empirical and qualitative data collected during the TRY program reveal that teens showed significant changes in their feelings of belonging in their community, belief in a bright future, and a feeling of having control of themselves. Because there are significant, real impacts that teens can see and feel with the TRY program, this data suggests that teens did, in fact, improve the self-efficacy aspect of self esteem. The data collected on adult attitudes also showed significant changes in the adults' perceptions of teens as co-leaders in delivering programs. One TRY coach stated, "This was a wonderful opportunity for me as well. I have been able to evaluate my own leadership skills and make improvements when necessary. The TRY program certainly allows room for us to share our knowledge with others and show how important they are to our society.

IDENTIFYING POTENTIAL RESPONSIBILITIES FOR FAMILY VOLUNTEERS

Volunteer programs should make every effort to work with local school systems that integrate service learning into the classroom curricula. However, whether or not this opportunity exists, professional volunteer administrators and middle managers should make every effort to involve teen and family volunteers with their programs. Numerous opportunities are available for teens or families to volunteer. These include: *mentoring other youth, *teaching other youth, *assisting other volunteers, *serving as a counsellor, *representing an agency on external committees, *serving on internal agency committees, *conducting promotional activities to other organizations/agencies, *answering office telephones, *maintaining computerized roster/ mailing lists, *stuffing envelopes, *organizing a newsletter, *working with other families, acting as host families, and helping with meals on wheels.

ENTIRE FAMILIES AS VOLUNTEERS...A POSITIVE MOVE

When entire families volunteer many of the obstacles of involving youth or adults alone can be overcome. The family members can support one another in times of disappointment, the legal liability issue of youth volunteers may be lessened, by having family adults involved, adults may be more likely to be involved if their children take part and trust can be established in the youth as they get positively involved.

Professional volunteer administrators or middle managers will immediately recognize the managerial benefits in family volunteering, especially with 4-H youth development programs. The managing family volunteer opportunities is easier because the additional supervision and guidance provided by the parents, grandparents, etc. However, special care should be taken with family volunteer opportunities to ensure that the teen members of the family have equal opportunities in decision-making and contributing independently. A Family Volunteering Work Sheet developed by Safrit, Groff, and Smith (1992) encourages volunteer managers to identify all family members, identify activities/skills/opportunities that the family currently likes to do, identify activities/skills/opportunities that the family would like to learn how to do, and identify family interests at specific times of the year.

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RELIEVING THE STRESS OF SINGLE PARENT FAMILIES

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Key Words: stress, single parenting, families of divorce, remarriage

Being a parent is a tough job. Being a single parent requires special needs and resourcefulness. Single parenting affects every aspect of life. Many feelings of guilt, isolation, anxiety, grief, or loneliness surface for those in single parent families. Resources and services offered through Beech Acres Single Parent Center and Aring Institute help parents develop coping skills and give information that reduces stress.

The number of single parents is growing. The Single Parent Center of Beech Acres can help with services that meet the special needs of single parents. Single parent support groups meet throughout the city offering a chance to share the joys and frustrations of rearing children alone. Referral services help single parents find resources for many needs. Quality child care is provided while parents attend support groups. A quarterly newsletter, *In Touch*, keeps single parents informed of opportunities and events, including information on divorce and remarriage programs.

The Single Parent Center staff helps locate services to assist with: child care, money management, housing, legal concerns, education, general health care, employment training, emergency assistance, and stress management. Single parents face some tough questions with few easy answers.

Children experience the absence, loss and separation of parents within single parent families. Unresolved anger, grief, guilt, and powerlessness cause children to demonstrate actions, and

feelings often acted out in the home, school, and community. Children who attend support groups with parents often express their dismay verbally or in acting out behaviors.

Growing numbers of parents are feeling so overwhelmed they cannot appropriately see those interventions that are necessary to assist their child/children in transitions. Increased numbers of parents, agencies, and parent advocates are realizing that stress between parents is likely to affect children. The worst scenario is using the child like a "football" between parents.

Projected figures in 1989 showed that approximately 40% of white children and 70% of African American children will spend time prior to their adulthood in a single parent household. The Census Bureau shows 15.6% of all children in Ohio live in poverty. More than half of all children in female-headed households live in poverty. In Ohio, children under five years old indicate that the rate of poverty is over 33%.

Many single parent families result from a divorce. The Aring Institute of Beech Acres staff has been offering programs for families of divorce and remarriage in Cincinnati for 13 years. These programs are comprehensive in meeting the needs of families in transition and have been nationally recognized for their quality and innovation.

Separation, divorce and stepfamily changes place unique pressures on children and parents often resulting in pain, confusion and fear. Children who are unable to adjust to these changes often suffer long-term emotional trauma. At this time when children need extra help, parent's ability to help children cope may be at a low ebb. Often families experience this change in isolation, without the support of extended family, friends, or even the help of each other. Support groups, educational programs, and mediation can fill this gap.

The good news is that children who see their parents weathering the storm, keeping their sense of humor, and learning from their mistakes, can become more flexible, responsible adults. Believing that divorce is often the best solution to an otherwise destructive family situation, the Aring programs help people learn skills to handle their feelings, enhance their self esteem, improve their parenting effectiveness and their ability to talk with each other about change and conflict.

Research has shown that children are hurt less by divorce if at least one of their parents has made a positive recovery and has a good relationship with their children. The following groups help parents meet those goals: Shared Experience, Succeeding in Relationships, Mothers without Custody, Fathers without Custody, Stepfamilies, Adult Children of Divorce. There were 386 parents completing these groups.

The boys and girls' groups about divorce provide a safe environment for children with similar experiences to understand their parents' divorce. They learn helpful ways to cope with their own reactions and feelings. The groups take place in schools and other community locations. There were 1832 children completing groups.

A joint project of The Aring Institute and local courts of domestic relations, resulted in sessions to give people information about divorce and what community resources can help them. By knowing what to expect, divorcing people are able to make better decisions for themselves and their children. Topics covered include: how to help children cope with divorce, what helps adults, and what to expect from lawyers and the court. There were 504 people attending sessions.

A classroom presentation, My Family Your Family, for second to fifth graders helps children become aware of the value of the family, recognize and respect family differences and learn where they can find help when family changes are hard. There were 2242 children attending presentations.

Research has shown that an amiable parent to parent relationship following divorce is important to a child's adjustment. Mediation sets the stage for setting up parenting schedules without argument, keeping children out of the middle and avoiding negative remarks about the other parent far better than the adversarial court process. The number completing mediation was 144.

By assisting professionals to increase their knowledge and skills in working with families of divorce and remarriage, families can be more effectively helped by these professionals. Aring Institute trained 819 professionals. When friends and extended family members understand what helps families going through divorce and remarriage, they can be more supportive and helpful, thus increasing the possibility of a successful adjustment for children. There were 1192 persons attending lectures to raise community awareness. The goal of the Aring programs is to help children either directly or indirectly. With support and skills they can carry with them through life, children of divorce and remarriage are more likely to grow up realizing their potential and become contributing adults to our society.

UNDERSTANDING LITERACY

CAN YOUR CLIENTS READ?

Lee Ann Adams, Curriculum and Training Coordinator, Columbus Literacy Council, 1200 West Broad Street, Columbus, Ohio 43222, 614/275-0660.

Co-Presenter: Cynthia T. Fischer, Special Projects Coordinator, Columbus Literacy Council, 1200 West Broad Street, Columbus, Ohio 43222, 614/275-0660.

Key Words: adult literacy, family literacy, literacy referral programs, literacy awareness

While one in five adults in the United States is functionally illiterate, health and human service agency clients have a functional illiteracy rate at least twice the national average: 40% and above. Some agencies quote a 90% figure. If more than one-third of an agency's clients have low reading levels, and staff is not aware of the prevalence and consequences of illiteracy, the effectiveness of the agency can be severely compromised. Staff can be sensitized to the special needs of clients with low reading levels, and can be trained to recognize, approach and refer

clients to appropriate literacy programs within the community. In addition, agencies must be willing to modify written materials, including intake and operational procedures, to serve the needs of clients with poor basic skills.

One component of staff training is learning to recognize a client who may have reading difficulties so that the client can be better served. Staff should be trained to recognize certain "signals." For example, the client will have many excuses for not filling out paperwork: "My hand hurts." "I left my glasses at home." "My spelling is terrible." "I don't have time today." "Let me take this home and I'll bring it back tomorrow." This person may also become very nervous when presented with a form to complete. He may walk out or become aggressive. He may not follow directions. He may be late or miss appointments, may not make appointments, and may not respond to letters. These behaviors can be indicative of reading/writing difficulties; however, be aware that these behaviors may also stem from other causes.

As in any counseling situation, confidentiality **MUST** be a top priority. An adult who has a reading problem may feel embarrassed, tense, defensive, scared, overwhelmed or even threatened. The staff member must be perceived by the client as accepting and willing to take the time to listen. If the staff member comes across to the client as an authority figure, perhaps another staff person should approach the client. Intervention must take place in a private place, and the client must feel there is time to address his needs. In approaching the client who may have low basic skills, be matter of fact and don't treat the problem as a crisis. Let the client know this is a common problem, and that it is not his fault that he can't read as well as he'd like. Emphasize that he needs **IMPROVEMENT** in basic skills, not that he needs to learn to read.

Give the client a chance to open up. Say something like: "Let me know if you need help." "I know this is a lot of paperwork. I can do the writing for you." "Take your time." "Many people have trouble with this form." Often the client will provide a further opening by agreeing, "Yes, I always have trouble with writing," or "I'm not a good speller." At this point the staff member could say, "I know about a program that could help you with reading and writing. Here's their number. If you'd like, later I could help you make the call." Do not put the client on the spot by calling without his permission. It may take him some time to follow through with your suggestion that he work on improving his skills.

Adults with low reading levels have limited access to information about available programs, and tend to learn about them through word of mouth. The personal interaction between clients and health and human service providers, employers, and educators provides an effective mechanism for informing the client of the availability of literacy services which are free, confidential, and convenient.

It is imperative that agency staff be informed about the availability of literacy programs in local communities. This information can be obtained by calling the National Read Hotline at 1-800-228-8813. Once local programs are contacted, explore ways of working together. Local literacy providers will often cooperate with health and human service agencies to provide materials for learner recruitment, perform readability studies on written materials and even provide sensitivity training for staff. If possible, staff should visit local literacy programs. If you intend to ask clients to call the Hotline number themselves, post the number in your office and call it yourself so that you know what happens to a client who calls.

Finally, an agency needs to look at its operations. How can intake be made easier for all clients, not just the low level reader? Are the written materials crowded with information? Are they difficult to read? Is the space allowed for writing small and cramped? Can the questions be asked in a simpler way? Can the paperwork be done by the interviewer/intake counselor? Is the client given every opportunity to receive help from the first moment he enters the agency WITHOUT having to actually admit he needs help? For example, instead of handing a client a form to fill out, could a staff member cheerfully write down that data himself? If the receptionist notices the client is uncomfortable giving answers in an open room, can he be referred to someone who can take the information privately? Is someone available who can explain the program in an easily understood way? Are brochures simply written, with one or two objectives and lots of "white" space for ease of reading?

All these factors may contribute to a more effective relationship between the client and the agency. Providing training for staff on recognition, intervention, and referral of clients with low reading skills will increase the effectiveness of health and human service agencies.

BUILDING COALITIONS TO REACH AUDIENCES WHO HAVE LIMITED RESOURCES

Richard Clark, Ph.D., Extension Specialist, 4-H Program Management, Ohio Cooperative Extension Service; Associate Professor, Agricultural Education; The Ohio State University, 208 Agricultural Administration Bldg., 2120 Fyffe Road, Columbus, OH, 43210, 614/262-0202.

This session will explore the concept of coalitions in public sector organizations. A panel composed of representative agencies that work with audiences who have limited resources will address opportunities for developing coalitions to address the needs of and issues facing families and youth who have limited resources.

(No Abstract Submitted)

FOCUS ON YOUTH

LET'S TALK SENSE ABOUT SEX

Beverly M. Kelbaugh, County Extension Agent-4-H, Ohio Cooperative Extension Service, 410 Fox Shannon Place, St. Clairsville, OH, 43950, 614/695-1455.

Key Words: parent education, sexuality, family life education, limited resources, pre-adolescent training

"Let's Talk Sense About Sex" is an exciting new program that was developed to assist parents and pre-adolescents to communicate openly about sexuality and other issues surrounding the growth and development of youth.

A seven-part video series, "Let's Talk Sense About Sex" was designed for in-home, family based sexuality education. In-home video tapes were chosen as the delivery system by West Virginia University the developers because of: (1) the busy lifestyle of many families; (2) the time and distance which families must travel to attend seminars or workshops; (3) the sensitivity of the subject matter and, (4) the familiar behavior of television viewing. National surveys indicate that a majority of U. S. households, regardless of income levels, own television sets and video cassette recorders, and that television is a powerful teaching tool. The printed family guide, which accompanies the video, serves as a resource for and encourages family discussion through activities.

The video series is also well suited in group presentations. The advantages of being able to select from in-home use or group presentation allow for the individual needs of families with limited resources or other special needs to be met. Families of limited resources often find it difficult to follow through with programs and activities because of transportation, or financial road blocks which intervene in their ability to attend group meetings and workshops. In-home use of the video series allows the family to complete the series as they can arrange time. On the other hand families with limited education as the primary limiting factor would benefit from instructor led workshops where video materials could be enhanced and participants could be led through the activities found in the parent guide.

The program is designed to increase communications between parents and pre-teens and covers topics of self-concept, decision making, goal setting, communication, conception, birth, physical development, assertiveness, relationships, media messages, and risks of early sexual activity.

The series encourages the postponement of sexual activity by young people. The video tape segments present the information in a comfortable, timely, and sensitive way that is attuned to both parents and pre-teen concerns and/or uneasiness as they approach the sensitive topics.

The initial pilot testing of the materials was done with seventy-nine (79) families in seven West Virginia counties. The materials were presented in an in-home environment to one hundred five (105) parents and one hundred five (105) children ranging in age from ten to thirteen.

The materials were pilot tested in Belmont County, Ohio with five groups of mothers-daughters. A total of 33 girls between 10-13 years of age and 29 mothers were in the test group. A pre-post test experimental design was used.

The control group in West Virginia viewed the video tapes six weeks following initial data collection and were administered the post-tests upon completion of the series. The control group in Belmont County completed pre-test data at one of two workshop sessions, prior to viewing and taking part in the individual activities for the 2nd-4th video segments. Segments 5-7 were viewed at a second session held from 2-4 weeks later. Activities were completed by each mother-daughter team for each of the six segments. Following the last activity, a post-test was completed by each youth and parent.

In both West Virginia and Ohio control groups were administered the pre-test at the same time as the experimental groups and following the completion of the experimental group training the control retook the pre-test. The subjects in the tests were predominately white, married, middle class and between 70-75% of the parents had some college experience. In the Belmont County trial all family members taking part in the study were female. Preliminary analysis of the data was run using two-way repeated Anova with group (experimental vs. control) x time of measurement (pre-test vs. post-test).

Scores on the parents yielded post-test scores superior to pre-test in both West Virginia and Ohio on (1) value of postponement in relation to future goals; WV ($F = 19.23$, $p < .001$); Ohio ($F = 4.125$, $p = .0002$); (2) factual knowledge; WV ($F = 36.16$, $p < .0001$); Ohio ($F = 2.273$, $p = .0001$), and (3) value of postponement; WV ($F = 15.41$, $p < .0003$); Ohio ($F = 2.387$, $p = .0231$). Ohio sample reported increased positive feelings about self, ($F = 2.387$, $p = .0231$), while WV sample reported significant increase in the "number of topics discussed with parents" ($F = 4.95$, $p < .03$).

Analysis of parent data for both West Virginia and Ohio groups revealed a significant effect of measurement with post-test higher than pre-test on the number of discussions held with children WV ($F = 6.127$, $p < .02$) and Ohio ($F = 26.48$, $p < .0007$). The "knowledge of factual information" item had a significant group effect with experimental group superior to the control group, WV ($F = 12.06$, $p < .0001$), a significant measure effect with post-test superior WV ($F = 13.74$, $p < .0005$, Ohio ($F = 2.273$, $p = .0001$).

Parents also reported an increase in the value of postponement in relation to future goals, in the Ohio sample, ($F = 4.125$, $p = .0002$); West Virginia sample also reported significant increase in communication ($F = 6.127$, $p < .02$). The intervention program benefitted both parents and children by increasing their knowledge of factual information and reinforcing the knowledge that there were benefits in postponement of sexual activity in relation to future goals. Parents in West Virginia reported a significant increase in comfort of communicating, although both samples reported a significant increase in the number of discussions with their children.

The families in both Ohio and West Virginia samples rated their attitudes toward delivery method by rating their preference for discussion books/pamphlets, video tapes, workshops and television. Very little change in preferences occurred in the Ohio sample from the pre-test to the post-test, but in all cases over 70% of the respondents preferred discussion as their first choice of delivery mode. On the pre-test, the following were given under first choice:

				Ohio/Pre
WV/Pre				Ohio/PostWV/Post
Discussion	78.6	90.7	75.9	73.2
Booklets/ Pamphlets	1.8	3.7	2.8	3.6
Video Tapes	3.7	4.7	3.16	17.9
Workshops	7.1	4.7	7.1	5.4
Television	3.7	1.9	4.0	1.8

West Virginia respondents reported they liked in-home use of the video tapes because of privacy, 22; stimulated discussion, 19; convenience, 15; easy to understand, 4; positive activities, 2; and valuable learning experience, 2. When asked what they didn't like, the responses included difficulty scheduling time to view tapes, 10; too much information, 3; information limited, 3; activities too time consuming, 2; boring at times, 2; and use of puppets, 2.

Ohio respondents who had been part of a two-part group workshop reported they liked having the set time and commitment to view the tapes and take part in the activities; expressed that they liked the mother-daughter groupings; felt the activities which were selected to accompany the viewing were structured to allow some private discussion which helped to foster future communication. Activity also allowed some sharing with other parents and their pre-teens which supported the importance placed by these families on improving communications and developing healthy attitudes toward sexuality. They were pleased that parents were seen as the primary sexuality educators even within the group presentation.

Ohio families were asked if they liked the delivery method or would have preferred in-home viewing and reported that they liked having the scheduled times to view the tapes. The majority of respondents liked viewing three segments each of the two times even though it was a great deal of information to assimilate. Three meetings would have been preferred by many because subject matter content but because of scheduling conflicts they still felt two sessions were adequate and more likely to be attended by the majority of participants.

Disadvantages of mother-daughter workshops is that the whole family does not get the advantage of increased communication skills; the double standard could continue to be a problem if males and females are not given benefit of the knowledge and skills to be gained from total family interaction.

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CAREER QUEST-HELPING YOUTH MOVE INTO THEIR FUTURE

Greg Siek, County Extension Agent, 4-H, Ohio Cooperative Extension Service, 3200 West 65th Street, Cleveland, OH, 44102, 216/631-1890.

The ability to set goals and direct limited resources toward reaching them is a vital skill for disadvantaged youth. This workshop will familiarize participants with a 4-H career planning curriculum for youth ages 12-15. Hands-on activities in "Career Quest" that helps youth set career goals and develop a five-step action plan. The session will demonstrate selected program activities and describe the "Career Camp" program.

(No Abstract Submitted)

IS THERE A LINK BETWEEN DIET AND BEHAVIOR?

Alma M. Saddam, Ph.D., R.D., L.D., Extension Specialist, Nutrition, Ohio Cooperative Extension Service, The Ohio State University, 265D Campbell Hall, 1787 Neil Avenue, Columbus, OH, 43210, 614/292-0827.

This session will focus on topics including: hyperactivity in children as it relates to food and eating habits; recognizing and treating eating disorders; and the relationship between food and mood. These concepts will be explored in relation to families and youth who have limited resources.

(No Abstract Submitted)

KNOW YOUR NEIGHBOR

Gail W. Yuen, County Extension Agent, 4-H, Ohio Cooperative Extension Service, 3200 West 65th Street, Cleveland, OH, 44102, 216/631-1890.

"Know Your Neighbor" is a global education program for youth to develop an understanding of the interrelatedness of world cultures, and an appreciation of living in diversity. Six topics

are explored: (1) Do You Dress and Sing Like Them?, (2) Do You Know Where To Find Them?, (3) Is Africa Bigger Than America?, (4) What Are The Stories Behind Your Toys?, (5) Do You Know What You Are Eating?, and (6) How Does It Feel Being in a Different Culture?. Over 1200 Cleveland area youth have participated in the program, and it was included in the mayor of Cleveland's "Unity Day Celebration".

(No Abstract Submitted)

4-H JUVENILE DIVERSION. . . SENTENCING YOUTH TO 4-H!

Susan S. Shockey, County Extension Agent, Home Economics, 1945 Frebis Avenue, Columbus, Ohio, 43206-3792, 614/443-6200.

Co-presenter: Judge Harvey E. Hyman, LLB, Probate and Juvenile Court, 2nd Floor, Paulding County Court House, Paulding, Ohio 45879, 419/399-8255.

Key Words: juvenile delinquency, 4-H, juvenile diversion, families at risk

WHAT IS JUVENILE DELINQUENCY?

The term juvenile delinquency may mean almost anything from truancy and misbehavior to rape and murder, depending on the person who is using the term. From a psychological point of view, delinquency refers to maladaptive behavior in which young people act destructively toward themselves and others; from a legal point of view it is defined by arrest records of those under the age of eighteen.

AGE DIFFERENCES IN DELINQUENCY

Not only does the extent of all delinquency decrease with age and maturity (Bachman, O'Mally, & Johnston, 1978) but the type of delinquency committed by adolescents of various age differs as well. Overall, minor delinquency, which includes such nuisance offenses as violation of curfew, running away, minor vandalism, abusing alcohol and drugs, and petty theft is fairly common in early adolescence, rises through mid and late adolescence, and subsides in early adulthood. More severe delinquency, including breaking and entering, robbery, assault and threatened assault, peaks in mid adolescence (15 years) and then declines.

TYPES OF DELINQUENTS

Delinquency is found in all socioeconomic groups. Among the affluent, their delinquent acts may surpass in seriousness of the lower class. The main motive is to "stir up some excitement". Ross (1979) identifies three classifications of juvenile delinquents: (1) Impulsive Delinquent is the one who engages in delinquent behavior once or a few times, but refrains from getting into future trouble because of guilt or fear; (2) Social Delinquent gives into the norms and peer pressure and engage in delinquent behavior; and (3) Unsocialized Delinquent has no internal controls. Poor family dynamics in the format of inconsistency, force, aggressiveness, and

hostility are associated with maladjusted adolescents who act out their disturbances in delinquency.

Stott (1982) did a study on 102 delinquent youth and concluded that maladjustment resulted from disturbed family relationships and is the root of all delinquency. He identified five delinquent states of mind: (1) Avoidance - Excitement: Adolescents seek excitement as a means of banishing the memory of distressing family situations. (2) Getting Removed From Home: Home is so distressing that adolescents commit repeated offenses in an effort to be committed to a foster home or an institution. (3) Hostility: Adolescents feel rejected from the family and therefore become delinquent as a means of self-banishment. (4) Delinquent Loyalty Testing: Adolescents test their parents' threats of kicking them out of their household. (5) Bravado: Acting tough is a means of compensating for doubts about being wanted and valued at home.

COMMON CHARACTERISTICS OF DELINQUENTS

Serious delinquents are maladjusted both in school and in their home environment. Several general factors appear time and time again in the literature in the characteristics of delinquents. These include poor home adjustment, poor school adjustments, antisocial tendencies, aggression, poor self-control, and low self-esteem.

NEED FOR ALTERNATIVE COMMUNITY - BASED JUVENILE DIVERSION PROGRAMS RECOGNIZED

At the 1992 Annual Conference on Restitution, Dr. Jerome Miller - Co-founder of the National Center on Institutions and Alternates, Alexandria, Virginia reported in his keynote speech that 90% of the youth need not be institutionalized. Money should be spent on programs to help keep families at home.

Locally, Ohio judges must help abolish a state law that allows them to lock up juveniles who did not commit a crime, or risk losing up to \$34 million in federal grants next year, Lt. Gov. Mike DeWine said (Columbus Dispatch June, 1992). Ohio is the only state in which judges can jail a "status offender" for up to five days in a detention center. Status offenses are not considered crimes, but include offenses such as truancy, run-a-ways, and violating curfew.

In 1986 Juvenile Judge Harvey Hyman, Paulding County recognized the problems and asked the Paulding County Extension Service to assist him in helping troubled youth and their families.

The 4-H Juvenile Diversion is being offered by The Ohio State University Cooperative Extension Service in 11 county offices, both urban and rural, throughout the state. The diversion program answers a critical need for the county judicial system, as well as a need for troubled youth and their families. This model program of community collaboration was started in Paulding County, Ohio, in 1986 where Juvenile Judge Harvey Hyman aspired to help youngsters who had committed a minor offense, and probably were in trouble for the first time.

"They weren't bad enough that I wanted to get them a record, nor did I want to incarcerate them, said Hyman. "But they needed something. I thought about it, and thought about it, and one night it came to me. I don't ever get 4-H'ers in court!" Being aware and respecting the

educational programs conducted by the OSU Extension Service, Judge Hyman discussed with the Paulding County Extension Service staff the possibilities of conducting a diversion program to instill responsibility to self, family, community, and school to youngsters who had committed a minor crime.

The benefits of conducting the program are helpful to both court systems and Cooperative Extension Service educational goals. Both systems want to: (1) Build Human Capital - Preventing the reoccurrence of delinquent behavior by preparing youth to become capable leaders by accepting responsibility and setting personal goals; (2) Strengthen Family Relationships - by communicating, increasing personal self worth, learning to cope with stressful situations, and increasing family well being; (3) Develop Community Resources and Save Tax Dollars - by rehabilitating youth in their home county.

COURT AND EXTENSION SERVICE PROGRAM COLLABORATION - "A WIN - WIN SITUATION"

The strengths of the OSU Extension Service programs include: (1) educational programs that expose youth and families to positive peer role models on a regular basis; (2) knowledge of child and adolescent development, needs, and issues; (3) understanding of dysfunctional family systems, (4) knowledge of causative factors underlying problem behavior and strategies for intervention, and (5) competencies and skills to empower families to take ownership and become responsible which will lead to personal development and change.

Extension Service faculty are trained professionals who possess listening and critical reflection skills, motivational developmental leadership skills used to identify personal strengths, and mediation skills used to bring together persons with different perspectives. The role of the Juvenile Court system has provided an alternative sentence that will help youth and parents to overcome their problems together as a family unit and in most cases help youngsters and their families develop into worthwhile citizens. Hyman says, "The program has worked out real well. It comes down to who is running it. If you have a person who cares, I think you could run the program anywhere."

PROGRAM DESCRIPTION

The parent and child are encouraged to attend the two-hour session from 3:00-5:00 PM for seven weeks. The class time lasts for one hour followed with one hour of 4-H activity. Class time is mandatory for the youth. Weekly format is as follows:

Week 1:

Class: Self-Esteem - Who Am I?

4-H Activity: 4-H Project Selection; Select 4-H Club Name

Week 2:

Class: Personal Values

4-H Activity: How to Conduct a Business Meeting; Project Progress Report

Week 3:

Class: Coping with Stress

4-H Activity: Elect 4-H Club Officers; Project Progress Report

Week 4:

Class: Interpersonal Communication

4-H Activity: 4-H Club Meeting; Project Progress Report

Week 5:

Class: Goal Setting/Decision Making

4-H Activity: 4-H Club Meeting (plan club party); Project Progress Report

Week 6:

Class: Peer Pressure

4-H Activity: Project Evaluation; 4-H Club Party

Week 7:

Class: Cooperation

4-H Activity: Choices and Challenges (High Ropes Initiative) Course

Impact results in Paulding County are two hundred sixty four (264) juveniles have completed this program, 1 dropped out, 3% returned to court, 13% enrolled in traditional 4-H club work, 16% participated in 4-H events, and 29% were totally involved in 4-H. It is estimated that the Juvenile Diversion Program in Paulding County has saved county tax payers over \$300,000.00.

EVALUATION RESULTS

Parents

89% - Felt they had learned to listen better to their child.

84% - Thought his/her child gained new skills through the 4-H project taken.

95% - Would like to see the program given to other children.

Child

91% - Felt they could talk more easily to others and had learned to listen better to their parents.

97% - Felt better about themselves as a person.

94% - Learned doing something wrong is not a way to make friends, they have learned the difference between right and wrong, and they would like to see this program given to others.

The Paulding County 4-H Juvenile Diversion Program is an example of how community collaboration works. By developing a collaboration such as that initiated in Paulding County, money is saved because the administration of services is already established, and the educational programs are recognized in the community. The success of the 6 year old Paulding County program can be credited to three factors: (1) the Juvenile Court and The Ohio State University Cooperative Extension Service having similar goals; (2) administrators are humanitarians that care about youth and families, and (3) the two agencies communicate freely and share their attributes and strengths.

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STRATEGIES IN WORKING WITH CHEMICALLY DEPENDENT ADOLESCENTS AND THEIR FAMILIES

Betty Seed Woeller, Certified Chemical Dependency Counselor III, Site Manager, Bassett House, Athens, Ohio, 45701, 614/594-3511.

This session will focus upon both treatment and assessment strategies in working with chemically-dependent, "acting-out" adolescent. The dynamics of the addictive family surrounding the substance-abusing juvenile will also be addressed.

(No Abstract Submitted)

MARKETING PROGRAMS TO YOUTH WHO HAVE LIMITED RESOURCES

Garry Gibbons, District Specialist, 4-H, Associate Professor, Ohio Cooperative Extension Service, Ohio Agricultural and Development Center, Wooster, OH, 44691, 216/263-3831; Patrick Carroll, County Extension Agent, 4-H, Ohio Cooperative Extension Service, The Ohio State University, 490 South Broad Street, Canfield, OH, 44406, 216/533-5538.

Strategic marketing is involved in the proactive "selling" of an organization's products. Any marketing strategy involves learning what prospective buyers or users want and what products an organization has or can develop to fill clients' needs and wants. The strategies for developing marketing plans for reaching youth in a limited resource environment will be addressed during this session, including a complete outline for implementing the plan and applying marketing concepts to audiences who have limited resources (e.g., S.W.O.T., N.O.A., and the mini-max concept). Participants will be involved in "hands-on" training in the development of a marketing plan.

(No Abstract Submitted)

WHAT'S MY LINE? - DEVELOPING SELF-ESTEEM AMONG YOUTH WHO HAVE LIMITED RESOURCES

Robert Cripe, County Extension Agent and Chair, 4-H and CNRD, Ohio Cooperative Extension Service; The Ohio State University, 19 S. South Street, P.O. Box 151, Wilmington, OH, 45177, 513/382-0901.

Key Words: self-esteem, self-worth, self-image, self-confidence

Self-esteem is by far one of the most dynamic variables that will influence the outcome of a person's perceptions and opinions of themselves, their feelings, thoughts, interest, abilities and of others. Self-esteem is recognized as a basic personality characteristic of positive and productive behavior in both children and adults. Studies indicate that high self-esteem is the single most important ingredient for success in life.

All of us need to feel we are important; that we appreciate our own worth; that our feelings and thoughts count. When we feel personal success and confidence, we possess a positive self-esteem. Persons who have high self-esteem who like themselves and feel good about themselves, who have self-respect, who feel competent and loved are more prepared to deal with the pressures and stresses of every day life. Too many families and youth, especially those with limited resources today, are void of the feelings needed to build and strengthen their own self-esteem. In all to many cases, absence of a positive self-esteem can accelerate a person into a downward spiral. The result is a low self-worth, self-criticism and self-unacceptance.

This workshop will provide a hands-on approach for participants to explore several alternatives and strategies to strengthen their self-awareness and self-concept. By identifying their own "What's my line?", participants will learn more about their own attitudes, interest, feelings, and actions for self and toward others while working to eliminate stereotypic and social barriers.

The good news is, that a person's self-esteem can be a positive and powerful force that can strengthen and build self-image, self-worth and self-confidence. Self-esteem can be changed, no matter a person's age or situation. Self-esteem is the value we place on what we believe to be true about ourselves. As Dr. Nathaniel Branden explains in his book, Honoring the Self, "to have high self esteem is to feel confidently appropriate to life, that is, competent and worthy...or, your implicit judgment of your ability to cope with the challenges of your life; to understand and master your problems." A person has a right to be happy and to respect and stand up for their interest and needs.

Dr. Branden continues by saying that, "to have low self-esteem is to feel inappropriate to life; to feel wrong as a person." And that which is neither high or low fluctuates between feeling appropriate and inappropriate. These inconsistent feelings are affected in our behavior - "sometimes acting wisely, sometimes acting foolishly - thereby reinforcing the uncertainty."

If given a choice, a person would surely prefer a positive self-image and self-worth. When a person looks at themselves in the mirror, they either accept or reject self. Persons with positive self-esteem do not think of themselves a perfect or better than others, but feel good and secure

for who they are. Those with a low esteem rejects self; they see a failure and a negative self-image. To develop a positive self-confidence and self-worth, realize that self-esteem level is a matter of degree. Self-esteem is very flexible or plastic. It is ever-changing. And a person's self-esteem is just that - their own. Each individual must take ownership; to assume the responsibility for their own self-esteem.

If we are individually responsible for how we think, feel, and act, we should be able to make better choices and constantly visualize personal success; no matter our mistakes or failures. It's not what happens to us, but how we choose to respond to it. Persons with high self-esteem are in charge of their own lives and have a high degree of self-acceptance. It's been said that the strongest single factor in prosperity consciousness is self-esteem: believing you can do it, believing you deserve it, believing you will get it.

MEETING THE CHALLENGES OF YOUTH WHO ARE HOMELESS

Neil Brown, Coordinator of the Staff Intensive Program, Huckleberry House, Columbus, Ohio.

This workshop will focus on the special needs that youth who are homeless present, and provide strategies for effectively working with this target population. The speaker will discuss Franklin County's new initiative of bringing youth home from out-of-county treatment programs and "wrapping" services around them to best meet their needs. This new initiative employs a number of creative and collaborative techniques for responding to the multiple needs and problems of this target population. Through this innovative process, both youth and staff are motivated to collaboratively work together.

(No Abstract Submitted)

AUTHOR INDEX

	PAGE
Adams, Lee Ann Understanding Literacy	37
Anthony, Carrie Marie Health Care With Limited Resources	23
Arkin, Carol Ford Parenting Young Children: For The Professional Working With Families Who Have Limited Resources	30
Birkhoff, Jeanette Health Care With Limited Resources	23
Brown, Neil Meeting The Challenges Of Youth Who Are Homeless	50
Brush, Sally Relieving The Stress Of Single Parent Families	35
Carbonell, Julia Arbin Understanding Family Violence	12
Carroll, Patrick Marketing Principles For Non-Profit Organizations Working With Limited Resource Audiences	15
Carroll, Patrick Marketing Programs To Youth Who Have Limited Resources	48
Chirayath, Bonny W. Managing Limited Human And Financial Resources . . .	16
Clark, R. Building Coalitions To Reach Audiences Who Have Limited Resources	39
Cripe, Robert What's My Line? - Developing Self-Esteem Among Youth Who Have Limited Resources	49
Curlee, Debra Lewis Neighborhood Family Centers	20
Fischer, Cynthia T. Understanding Literacy	37
Frazier, Fran Cultural Do's and Don'ts	7
Gibbons, Garry Marketing Principles For Non-Profit Organizations Working With Limited Resource Audiences	15
Gibbons, Garry Marketing Programs To Youth Who Have Limited Resources	48
Hyman, Harvey E. 4-H Juvenile Diversion...Sentencing Youth To 4-H!	44
Kelbaugh, Beverly M. Let's Talk Sense About Sex	40
LaMuth, Jackie Managing Limited Human And Financial Resources	16
Langenhop, Mary Lou Urban Families - Can You Help?	7
Love, Revella Logan Relieving The Stress Of Single Parent Families	35
Maloney, Michael E. Understanding Appalachian Culture	8
Martin, Rebecca E. Home Safety Issues Facing Families Who Have Limited Resources	9
McKinney, Carolyn Managing Limited Human And Financial Resources	16
McLellan, Nina Neighborhood Family Centers	20
Saddam, Alma M. Is There A Link Between Diet And Behavior	43
Safrit, R. Dale Volunteerism and Limited Resource Audiences	1
Safrit, R. Dale Volunteerism With A Family Focus	30
Seiling, Sharon B. Managing Limited Human And Financial Resources	16
Shockey, Susan S. 4-H Juvenile Diversion...Sentencing Youth To 4-H!	44
Siek, Greg Career Quest-Helping Youth Move Into Their Future	43
Smith, Claudette Managing Limited Human And Financial Resources	16
Smith, William Volunteerism and Limited Resource Audiences	1

PAGE

Smith, William Volunteerism With A Family Focus	30
Spiegel, Marilyn R. The Answers To Evaluating Programs For Limited Resource Audiences	13
Spiegel, Marilyn R. Managing Limited Human And Financial Resources	16
Sterling, Dora The Plight of Homeless Families	15
Weber, Bill Health Care With Limited Resources	23
Wessel, Judith Managing Limited Human And Financial Resources	16
Woeller, Betty Seed Strategies In Working With Chemically Dependent Adolescents And Their Families	48
Yuen, Gail W. Know Your Neighbor	43